

# APPLICATION FOR FUNDING

## Community Development Block Grant Program

- General Allocation *for fiscal year 2003/2004*
- Native American Allocation *for fiscal year 2003/2004*
- Colonias Allocation *for fiscal year 2002/2003 and fiscal year 2003/2004*

*(fiscal year 2002/2003 = July 1, 2002 to June 30, 2003)*

*(fiscal year 2003/2004 = July 1, 2003 to June 30, 2004)*

November 2002



STATE OF CALIFORNIA  
Department of Housing and Community Development  
Division of Community Affairs  
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# ATTENTION

## IMPORTANT CHANGE REGARDING SUBMITTAL INSTRUCTIONS

Applications received by the Department after 5:00 P.M., February 14, 2003, will not be accepted and will be returned to the jurisdiction regardless of postmark/mailing date

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# Introduction

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## Contents of Application

The Application is divided into two major sections. Most entries are self-explanatory. Where Instructions are needed, they are located in front of each section of the Application.

Section	Content
<b>Application Sections</b>	<b>Part A.</b> <ul style="list-style-type: none"><li>• Application Summary Forms</li></ul> <b>Part B.</b> <ul style="list-style-type: none"><li>• Required Certifications and Documentation</li></ul> <b>Part C.</b> <ul style="list-style-type: none"><li>• Capacity</li><li>• Other Funding Sources</li><li>• Program Income</li></ul>
<b>Activity Description Forms</b>	<ul style="list-style-type: none"><li>• color-coded by categories of eligible activities</li><li>• proposed activities/description and documentation of need</li><li>• project budget data</li></ul>

## Timelines

Activity	Date
NOFA Release Date	October 18, 2002
Application Release Date	<b>November 1, 2002</b>
Application <b>DEADLINE</b>	<b>February 14, 2003 (5:00 p.m.)</b>
Housing Element Self-Certification	April 4, 2003
<b>AWARDS ANNOUNCED</b>	May 1, 2003

**Instructions  
for Submitting  
the Application**

Applications must be **received** in the Department by 5:00 p.m. on February 14, 2003.

Late or incomplete applications will not be considered for funding.

Telefaxed applications are not acceptable.

Additional information that would enhance competitiveness will not be accepted after the application deadline.

The Department reserves the right to request additional information as a special condition to the grant agreement.

What	Instructions
<b>COPIES:</b>	<p>Submit the following:</p> <ul style="list-style-type: none"><li>• One complete <u>original</u> set (with original signatures) of the application and all attachments; and</li><li>• One complete copy of the application with all attachments; and</li></ul> <p>Also include the following documents in the <u>front pocket of the original binder set</u>:</p> <ul style="list-style-type: none"><li>• One additional copy of the authorizing Resolution(s); and</li><li>• One additional copy of all forms in Part A; and</li><li>• One additional copy of all forms in Part B; and</li><li>• One additional copy of the Census tables.</li></ul>
<b>PACKAGING:</b>	<ul style="list-style-type: none"><li>• Place each copy of the application and attachments in an appropriate sized, 3-ring loose-leaf binder.</li><li>• <b>Place an identifying label on both the cover and spine of the loose-leaf-binder</b></li><li>• <b>Clearly label the “original” and the “copy”</b></li><li>• <b>Paginate every page</b></li><li>• Use tabbed pages or other clearly-marked separating devices to mark attachments--<u>do not use adhesive stickers or flags--these devices are easily misplaced or lost</u></li></ul>

BEFORE YOU MAIL THE APPLICATION	<ul style="list-style-type: none"> <li>• Check each set of the application for completeness</li> <li>• Make sure all the attachments are included</li> <li>• Ensure that all pages (including attachments) are numbered consecutively</li> <li>• Ensure that the original application contains all original signatures on the appropriate forms</li> </ul>
HOUSING ELEMENT SELF- CERTIFICATION	<ul style="list-style-type: none"> <li>• If you are sending in the housing element self-certification with the application, be sure to so check on the Application Checklist.</li> <li>• If you send it in under separate cover, the Department <u>must receive it (postmarks are <b>not</b> acceptable) by <u>April 4, 2003.</u></u></li> </ul>
MAILING INFORMATION	<p style="text-align: center;"><b>Mailing Address:</b></p> <p>State Community Development Block Grant Program Department of Housing and Community Development P. O. Box 952054, MS 390-2 Sacramento, CA 94252-2054</p> <p style="text-align: center;"><b>Street Address:</b></p> <p>2710 Gateway Oaks Drive North Building, Suite 190 Sacramento, CA 95833</p>
FOR FURTHER INFORMATION:	<p>Telephone: (916) 263-0485</p> <p>Fax: (916) 263-0489</p> <p>Website: <a href="http://www.hcd.ca.gov/cdbg">www.hcd.ca.gov/cdbg</a></p>



**General  
Administration  
and Activity  
Delivery  
Percentage  
Limitations**

Part of this application consists of tables in which we ask applicants to allocate the grant funds that will be spent on general administration of the grant and on “activity delivery” (activities related to the direct implementation of the grant). Applicants may choose to make a commitment of local funds in these cost categories as a means of achieving points under the scoring category of Leverage (see NOFA for more information about the scoring categories).

CDBG has established limits on the amount of funds that can be requested for general administration and activity delivery.

- **General Administration (GA)**

GA includes costs for general grant administration, such as office space and equipment, accounting/fiscal, travel, and program reporting to CDBG. See Appendix E for cost categories. Under Federal and State law, the Department may allow grantee jurisdictions up to 7½ percent of their CDBG funds for GA. However, jurisdictions are not prohibited from committing additional local, non-CDBG resources to GA beyond the 7½ percent.

Applicant jurisdictions will receive points for local administrative contributions (leverage), not to exceed 10 percent of the grant amount. This 10 percent calculation will take into account the CDBG dollars requested for GA, as illustrated in the following examples.

Example	
<p>Example 1</p> <p>7½ percent CDBG GA and 2½ percent local funds</p>	<p>Jurisdiction A requests \$500,000 and proposes using 7½% of the CDBG award (\$37,500) for general grant administration. Jurisdiction A could receive competitive credit for up to \$12,500 in local administrative services (local leverage) contributed to the grant per the following formula:</p> <p>10% of the \$500,000 grant = <b>\$50,000</b> maximum allowable for General Administration.</p> <p>\$37,500 (7½% CDBG) + \$12,500 (2½% Local Commitment) = \$50,000</p>

Example	
<p>Example 2</p> <p>A portion of CDBG GA and a greater portion of local funds</p>	<p>If Jurisdiction B proposes using less than 7½% of the CDBG grant for general administration, it may receive credit for committing up to the 10% total as illustrated below:</p> <p>Jurisdiction B requests \$500,000 and proposes using 5% of the CDBG award (\$25,000) for general grant administration. Jurisdiction B could receive competitive credit for up to \$25,000 in local administrative services (local leverage) contributed to the grant per the following formula:</p> <p>10% of the \$500,000 grant = <b>\$50,000</b> maximum allowable for General Administration.</p> <p>\$25,000 (CDBG) + \$25,000 (Local Commitment) = \$50,000</p> <p><i><b>Note: Jurisdiction B would be more competitive than Jurisdiction A in the category of local leverage if these were the only local contributions.</b></i></p>

- **Activity Delivery (AD)**

AD means the costs associated with carrying out the activity, such as marketing, eligibility determinations, preparing loan documents, preparing final plans and specifications, etc. The amount of grant funds that can be allocated to Activity Delivery varies depending on the proposed activity. See Appendix E for guidance on cost categories.

The percentage amount is calculated on the amount requested for the activity, not the total grant amount.

Housing - New Construction	8%; 12% if difficult labor standards are invoked
Housing - Acquisition	8%; 12% if difficult labor standards are invoked
Housing - Rehabilitation	19%
Community Facilities	8%; 12% if difficult labor standards are invoked
Public Services	8%
Public Works	8%; 12% if difficult labor standards are invoked

**Note: “Difficult labor standards” means multiple subcontractors and/or numerous trades.**

## APPLICATION & ACTIVITY CHECKLISTS--INSTRUCTIONS

The Application Checklist **must be completed and submitted with the application**. In addition, an Activity Checklist must be completed for each activity in the application. These checklists serve the following purposes:

- The applicant's table of contents; and
- Provides the order in which the application must be organized and submitted; and
- Provides a checklist to ensure that all required documentation (for each activity) is included in the application.

## APPLICATION SUMMARY FORMS--INSTRUCTIONS

The Application Summary consists of 9 parts. Most of the blanks are self-explanatory. Information has been provided where needed for clarification.

### PART A. Application Summary Forms

#### 3. Official Authorized to Submit Application and Sign the Grant Agreement (if funded) per the Resolution:

This form must be signed by an authorized official (as stated in the Resolution). For joint applicants, a representative from each jurisdiction must sign and date the application. Please ensure that the original is placed in the binder with the "original" application.

#### 4. City/County Staff Contact Information

Please indicate the purpose(s) for which the named person can be contacted.

#### 5. Consultant/Program Operator/Other Public Agency Contact Information

Please indicate the purpose(s) for which the named person can be contacted.

#### 6. Funding Requested (by activity)

Itemize the funds requested for each category. The total of all lines must equal the total dollar amount requested in Part A. 1. You may apply for as many activities as you choose.

<b>Entries for specific activities:</b>	Please anticipate the predominance of funds to be spent on single-versus multi-unit Rehabilitation projects. It is preferable for you to request all rehabilitation funds for this predominant unit type. If you split rehabilitation between the two unit types you will be required to request funds and report by both unit types. For the three housing-related activities, estimate the dollar amounts to be spent on owner and renter occupied units.
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<b>Entries for specific activities (continued):</b>	If proposing more than one activity, enter the proposed amount to be spent on each activity.
<b>Planning Activities:</b>  (for Colonias applicants only)	Under the Colonias Allocation, your application may include one or more planning activities, and these activities are not subject to the 7 ½ % General Administration limitation. The planning activity must be directed towards the planning of a project that, if brought to completion, would meet the CDBG objectives i.e., TIG Benefit.
<b>10% Set-Aside:</b>  (not applicable for Colonias applicants)	<p>The applicant may propose to fund <b>one</b> project/activity using the 10% Set-Aside, provided that the applicant can demonstrate a minimum 51% TIG benefit.</p> <p>The maximum dollar amount allowable for the 10% Set-Aside is calculated by taking the total funding amount requested, subtracting the dollar amount allocated for General Administration, then taking 10% of the balance.</p> <p>Activity delivery is allowed on the Set-Aside project/activity. (Please refer to page 5 for the maximum allowable activity delivery percentages for each specific activity.)</p>

## 7. Census Data

Census data are needed for **each** proposed activity.

For each activity, check whether the proposed activity will be jurisdiction-wide or confined to a target area. If you checked “jurisdiction-wide,” fill in the Census tract data, but do not provide Block Group data.

If you checked “target area,” select the smallest unit of census data that encompasses your proposed target area. If your target area is completely within a Census Block Group, identify that Block Group. If your target area crosses boundary lines for more than one Census Block Group, identify all of those Groups.

## 8. Proposed Activity(ies) and Beneficiaries by Income Group

This part of the form provides information on the proposed total number of projects and beneficiaries during the term of the grant.

For each activity that is being proposed, identify the number of beneficiaries for each specific income group (Columns A. - C.). Under each column include the following:

- Owner-occupied **households** (if applicable for the activity)
- Owner-occupied **persons** (if applicable for the activity)
- Renter-occupied **households** (if applicable for the activity)
- Renter-occupied **persons** (if applicable for the activity)

In Column D., include the total number of beneficiaries, broken out as required, for each activity.

Note: Proposed activities may not exclude benefit to the lowest Targeted Income Group (LTIG). See Appendix B for a list of income limits by County.

- A. **Non-TIG.** Enter the number of households and the number of beneficiaries whose incomes are 81% and above (non-TIG) of the county median income. If CDBG funds will be used on a project where non-TIG households will benefit, then show those non-TIG household numbers on this chart. If non-TIG households will not be part of a project, then do not enter any data in column A.
- B. **TIG.** Enter the number of households and the number of beneficiaries whose incomes are between 51 and 80% of the county median income (targeted income group).
- C. **LTIG.** Enter the number of households and the number of beneficiaries whose incomes are 50% or less than the county median income (lowest targeted income group). You may not enter a zero in this column. Proposed activities may not exclude benefit to the LTIG group.
- D. **Totals.** Enter the total number of beneficiaries, broken out as required, for each activity.

Clarification for sub-columns under columns A., B., and C., and D.:
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**Housing--New Construction, Housing--Acquisition, Housing—Rehabilitation, and Public Works (and Planning activities if it relates to one of the indicated activities):**

First sub-column = number of households to benefit  
Second sub-column = number of occupants to benefit

Note: For Housing-New Construction, Housing-Acquisition, and Housing-Rehabilitation, please separate the data by owner-occupied and renter-occupied.

**Community Facilities, Public Services, and Planning** (only if activity is related to Community Facilities and/or Public Services):

First sub-column = number of projects anticipated

Second sub-column = number of users to benefit

## **9. Legislative Representatives**

If the applicant is in more than one district, list all of the district numbers.

For the California state legislators, enter the room number of their Sacramento Capitol office location.

For the U.S. Congressional legislator(s), enter the Washington, D.C. office building and its corresponding address where the legislator can receive notice of a funding award.

*The Department will notify all legislators of funding decisions.*

## **PART B. Required Certifications and Documentation**

Submit the completed pages from Part B. with all required documentation immediately following.

## **PART C. Capacity & Other Funding Sources**

### **1. Capacity**

Answer the question that pertains to the Allocation for which you are submitting the application. If you answered “No” to question #1, you must answer question #2 and you must submit any required documentation immediately following this page.

### **Other Funding Sources – General information**

The Department will award points in two categories of other funding sources (leverage): local financial contributions and private financial contributions. The most competitive applications will have both local and private financial commitments (leverage).

Please Note: Successful applicants will be held to all committed local and private contributions (leverage). Failure to secure the stated financial contributions will result in performance penalties on future applications and/or other Department action.

- All leverage must be contributed during the term of the CDBG contract.
- If the leverage is committed by an entity that receives State or Federal funding, explain the source of the leverage funds.

If the contributed funds were derived from a State or Federal source but have lost their identity as such, submit documentation to this effect to have the funds counted as leverage.

- Value of real property. If site control and value are well documented, we will count the entire value of real property as leverage in a housing new construction project. However, we will not double-count this value by also counting any loans that will be used to purchase this land.

For establishing the value of real property, the following may be used:

- Appraisals which **are less than one year old** (this is the preferred documentation for establishing the value of real property);
  - A Purchase Agreement signed by all involved parties;
  - The County Tax Assessor's value may be used, as documented on a property tax bill or equivalent document.
- All leverage must be directly linked to the CDBG activity for which funds are being sought. For example, the commitment of operating subsidies or supportive services will not count as leverage if CDBG funds are being sought for the development of a rental housing new construction project.
  - We will not double-count construction and take-out financing for a project-please specify which of these commitments, and in what amount, you want counted towards leverage.

## 2. Other Funding Sources - **LOCAL**.

For all activities included in the application, clearly identify the Use of Funds, Source of Funds (with Resolution #), Funding Type, Dollar Amount Committed, Commitment Date, and Page Number in the Application where the local Resolution is located. (Original application must contain an original or certified original Resolution.)

- Local Redevelopment Agency funds are an acceptable local contribution. If you use these funds, you must attach a separate Resolution (original or certified original) from the RDA.
- Show only those funds that originated at the local level; do not show funds that came from State or Federal sources on this page.

- If the applicant is a City and the County in which that City is located makes a contribution to this application, the County funds will be counted as a local contribution (as long as the source of County money is not State or Federal funds).
- Program Income from prior CDBG grants may not be used for local leverage.
- In-kind contributions. Jurisdictions may choose to contribute some form of in-kind services. This could be staff time or the value of other administrative services. If you use in-kind, specify the dollar value and whether and how much you are contributing to General Administration (GA) and/or Activity Delivery (AD). Be sure that these contributions are clearly identified in the local Resolution. (See Introduction section of Application for information on percentage limits for GA and AD.)
- Fee waivers. If the local contribution includes fee waivers, show the cost of the fees being waived on this chart.
- The Welfare Property Tax Exemption will not be allowed as leverage because it is not discretionary.
- Fee deferrals. If the local contribution includes fee deferrals, the leverage value of the deferrals will be based on “net present value,” for the period of the deferral, at the approximate cost of funds. Please attach your calculations if applicable.
- Infrastructure improvements. If the jurisdiction proposes infrastructure improvements as a local contribution, this work must be related to the proposed CDBG activity. For example, if a jurisdiction proposes to use redevelopment agency revenues to fund infrastructure improvements in the jurisdiction, points will only be awarded if these improvements are done in conjunction with the CDBG-funded activity.

Points will not be awarded if the CDBG activity is in one section of a jurisdiction and infrastructure improvements are being done in another part of the community. In the section of this application where you describe the proposed activity, tell us how this local complementary activity is related to the CDBG activity.

- Highway Users Taxes (gas taxes). If the jurisdiction proposes to use gas taxes in support of a housing new construction activity, the identified gas tax amount must be restricted to either: 1) the street(s) on which CDBG-assisted units will be located, or 2) work reasonably required as a condition of project development approval.



### 3. Other Funding Sources – PRIVATE.

For all activities included in the application, clearly identify the Use of Funds, Source of Funds Funding Type, Dollar Amount, Commitment Date, and Page Number in the Application where the applicable commitment letter is located.

Make sure the amounts in the chart match the amount on the letters of commitment (i.e., do not just indicate "contribution of materials;" specify the dollar value of the contribution).

Commitment letters must be recent--within six months of submitting this application. Commitment letters **must be** on the funding source's letterhead.

- Funds from private organizations (including non-profits). If a non-governmental organization is contributing funds and the source of those funds is State or Federal funding, the contribution will not be counted. Be sure to clearly indicate the source of such contributions.
- Sweat equity contributions. Sweat equity is based on hours worked and will be valued at \$10 per hour.

Formula: \_\_\_\_ Hours x \$10 per hour = \$ \_\_\_\_ = Total Sweat Equity

**Note:** In order to receive leverage credit for sweat equity, must comply with all lead-based paint regulations. Property owners **must fulfill one** of the following:

- Take a one day, HUD approved, work safe class; or
  - Perform activities that do not trigger lead-based paint regulations; or
  - Work on a home completed after January 1, 1978.
- The leverage value of developer fee deferrals will be based on "net present value" for the period of the deferral, at the approximate cost of funds. Please attach your calculations if applicable.
  - Volunteer labor and/or donated materials. If the jurisdiction shows volunteer labor and/or donated materials as a private leverage contribution, provide a letter or other documentation that clearly shows how the value of the labor and materials was calculated. Statements such as "based on past experience" for labor calculations are not adequate. If documentation of dollar value for labor is not supplied, CDBG will assign a value of \$10 per hour.
  - Contributions to a project from a program administrator may be a conflict of interest and taint a competitive procurement process. Please contact your CDBG Representative to discuss this issue if you anticipate contracting out program administration and a contribution from a potential program administrator is anticipated.

- Contributions towards payment of salaries and purchase of new supplies, equipment, inventory, or operating expenses for the grant term may be counted as leverage.
- If the proposed activity is an increase in existing service(s), leverage contributions associated with the increase will be counted for assigning a score for leverage.
- On the funding sources chart, when claiming leverage credit for salaries, inventory, and operating expenses, please clearly state the time period for which the leverage is claimed. For example, “United Way - Shelter Coordinator Salary (one year),” or “Safeway - increase in donated food (two years).”
- Other potential private leverage sources include, but are not limited to: the Federal Home Loan Bank Board Affordable Housing Program (AHP), conventional lenders, donated material, and foundation grants.

#### **4. Other Funding Sources – STATE**

Although the CDBG Program cannot count State/Federal funding sources as leverage, it is important to identify those funds so that HCD can more accurately report on this leverage to the Department of Housing and Urban Development (HUD).

For each activity, please identify the CDBG Activity, Use of Funds, Source of Funds, the Dollar Amount, and state whether the funds are committed.

#### **5. Other Funding Sources – Other FEDERAL**

Although the CDBG Program cannot count State/Federal funding sources as leverage, it is important to identify those funds so that HCD can more accurately report on this leverage to the Department of Housing and Urban Development (HUD).

Do not include your requested State CDBG Program funds in this or any “other funding sources” category.

For each activity, please identify the CDBG Activity, Use of Funds, Source of Funds, the Dollar Amount, and state whether the funds are committed.

## **6. Program Income**

Program Income (PI) is revenue received primarily from CDBG loan repayments from prior CDBG grants. If you are unsure about whether you have program income, contact a CDBG Representative.

For any PI entered here, be sure that the total is the combined total of all PI generated and/or committed from both G/NA and Economic Development grants.

Please identify any program income that you anticipate spending along with this grant.

The CDBG National Objectives are: Targeted Income Group benefit, Slums and Blight, and Urgent Need.

## APPLICATION CHECKLIST

NOTE: This Application Checklist & the applicable Activity Checklist(s) **must be submitted** with your completed application package. They will serve as the Table of Contents for your Application. All items listed must be submitted in the order listed.

- Enter the page number for each item that is included in the application.
- Enclose and mark each attachment. **Incomplete applications may not be considered for funding.**

TITLE	Required or optional	App. Page # (s)
<b>PART A. Application Summary Forms</b>		
• A. 1. – 9. - Application Summary Forms	<i>Required</i>	
<b>PART B. Required Certifications and Documentation</b>		
• B. 1. - Resolution(s) of the Governing Body	<i>Required</i>	
• B. 2. - Statement of Assurances	<i>Required</i>	
• B. 3. - Housing Element Self-Certification	<i>Required by 4/3/03</i>	
• B. 4. - Growth Control Information	<i>Required</i>	
• B. 5. - Citizen Participation Information	<i>Required</i>	
• B. 6. - Joint Powers Agreement	<i>See instructions</i>	
• B. 7. - NEPA Environmental Certification & Form 58.6	<i>Required</i>	
<b>PART C. Capacity &amp; Other Funding Sources</b>		
• C. 1. - Capacity	<i>Required</i>	
- Resumes, duty statements, letters of interest	<i>See instructions</i>	
• C. 2. - Other Funding Sources - LOCAL	<i>Required</i>	
• C. 3. - Other Funding Sources - PRIVATE	<i>Required</i>	
Letters of Commitment (if applicable)	<i>See instructions</i>	
• C. 4. - Other Funding Sources - STATE	<i>Required</i>	
• C. 5. - Other Funding Sources - Other FEDERAL	<i>Required</i>	
• C. 6. - Program Income	<i>Required</i>	
<b>Specific Activity Description Forms – (Identify activities proposed in this application and the page # in the application where the section begins.)</b>		
•		
•		
•		
•		
•		

## Housing New Construction

### REQUIRED ACTIVITY FORMS

*Note: Use this checklist only if you are applying for the named activity.*

Title	Required or optional	App. Page #(s)
• Need for Activity (A. 1. a., b. c.)	<i>Required</i>	
• Project Description (A. 2. a.)	<i>Required</i>	
• Off-site improvements documentation, if applicable	<i>See instructions</i>	
• State Objectives (A. 2. b.)	<i>Optional</i>	
• Site Control (A. 2. c.)	<i>Required</i>	
• Site Control documentation (if applicable)	<i>Required</i>	
• Environmental Clearance (anticipated) (A. 2. d.)	<i>Required</i>	
• Census Data Chart (A. 3. through 5. b.)	<i>Required</i>	
• Attach Census tables (with calculations) and/or the results of the local survey, if applicable.	<i>Required</i>	
• Waiting List Information or Market Study (A. 6.)	<i>See instructions</i>	
• Supplemental Information (A. 7.)	<i>Optional</i>	
• Targeted Income Group Benefit (B. 1. through 5.)	<i>Required</i>	
• Sources and Uses Form (C. 1.)	<i>Required</i>	
• Program Readiness Chart (Part D)	<i>Required</i>	
• Required Maps (Ethnic/TIG, Location, Project Site) (Part E.)	<i>Required</i>	
<b>OTHER:</b>		

## Housing Acquisition

### REQUIRED ACTIVITY FORMS

*Note: Use this checklist only if you are applying for the named activity.*

Title	Required or optional	App. Page #(s)
• Need for Activity (A. 1.)	<i>Required</i>	
• Project Description (A. 2. a.)	<i>Required</i>	
• Off-site improvements documentation, if applicable	<i>See instructions</i>	
• State Objectives (A. 2. b.)	<i>Optional</i>	
• Site Control (A. 2. c.)	<i>Required</i>	
• Site Control documentation (if applicable)	<i>Required</i>	
• Environmental Clearance (anticipated) (A. 2. d.)	<i>Required</i>	
• Census Data Chart (A. 3. through 5. b.)	<i>Required</i>	
• Attach Census tables (with calculations) and/or the results of the local survey, if applicable.	<i>Required</i>	
• Supplemental Information (A. 6.)	<i>Optional</i>	
• Targeted Income Group Benefit (B. 1.)	<i>Required</i>	
• Sources and Uses Form (C. 1.)	<i>Required</i>	
• Program Readiness Chart (Part D.)	<i>Required</i>	
• Required Maps (Ethnic/TIG, Location, Project Site) (Part E.)	<i>Required</i>	
<b>OTHER:</b>		

## Housing Rehabilitation

### REQUIRED ACTIVITY FORMS

*Note: Use this checklist only if you are applying for the named activity.*

Title	Required or optional	App. Page #(s)
• Need for Activity (A. 1.)	<i>Required</i>	
• Project Description (A. 2. a.)	<i>Required</i>	
• State Objectives (A. 2. b.)	<i>Optional</i>	
• Jurisdiction-wide Census Data Info. (required only for jurisdiction-wide programs) (A. 3.)	<i>See instructions</i>	
• Target Area Census Data Info. (required only for target area programs <u>with</u> current survey data) (A. 4.)	<i>See instructions</i>	
• Age of Housing Stock. (A. 5.)	<i>Required</i>	
• Overcrowding. (A. 6.)	<i>Required</i>	
• Attach 2 copies of Housing Element where the jurisdiction-wide data is documented. (for A. 3)	<i>See instructions</i>	
• Attach a copy of the survey form used and a summary of the survey. (for A. 4.)	<i>See instructions</i>	
• Attach Census Tables and show calculations. (A. 5.- 6.)	<i>Required</i>	
• Supplemental Information (A. 7.)	<i>Optional</i>	
• Targeted Income Group Benefit (B. 1. – 3.)	<i>Required</i>	
• Attach documentation for TIG Benefit	<i>See instructions</i>	
• Program Readiness Chart (Part C.)	<i>Required</i>	
• Required Maps (Ethnic/TIG, Location, Project Site) (Part D.)	<i>Required</i>	
<b>OTHER:</b>		

## Public Services

<b>REQUIRED ACTIVITY FORMS</b>		
<i>Note: Use this checklist only if you are applying for the named activity.</i>		
Title	Required or optional	App. Page #(s)
• Need for Activity (A. 1.)	<i>Required</i>	
• Project Description (A. 2. a.)	<i>Required</i>	
• Environmental Clearance (anticipated) (A. 2. b.)	<i>Required</i>	
• Basic Problem to be addressed by this activity. (A. 3.)	<i>Required</i>	
• How was problem determined? (A. 4.)	<i>Required</i>	
• Attach documentation of the problem. (A. 4.)	<i>Required</i>	
• Extent project will solve the problem & Commitment by service providers. (A. 5.)	<i>Required</i>	
• Description of <b>each</b> service to be provided. (A. 6)	<i>Required</i>	
• ADA accessibility issue. (A. 7.)	<i>See instructions</i>	
• Chart for Documentation of Problem and Commitment to Provide Services. (A. 8)	<i>Required</i>	
• Copies of documentation to substantiate 1)severity of need, and 2) service provider commitments (must be on service provider organization letterhead). (A. 8.)	<i>Required</i>	
• Targeted Income Group Benefit (B. 1. – 3.)	<i>Required</i>	
• Attach documentation for TIG Benefit	<i>See instructions</i>	
• Program Readiness Chart (Part C.)	<i>Required</i>	
• Required Maps (Ethnic/TIG, Location, Project Site) (Part D.)	<i>Required</i>	
<b>OTHER:</b>		



## Community Facilities

### REQUIRED ACTIVITY FORMS

*Note: Use this checklist only if you are applying for the named activity.*

Title	Required or optional	App. Page #(s)
• Need for Activity (A. 1.)	<i>Required</i>	
• Project Description (A. 2. a.)	<i>Required</i>	
• Site Control (A. 2. b.)	<i>Required</i>	
• Site Control documentation (if applicable)	<i>Required</i>	
• Environmental Clearance (anticipated) (A. 2. c.)	<i>Required</i>	
• Basic Problem to be addressed by this activity. (A. 3.)	<i>Required</i>	
• How was problem determined? (A. 4.)	<i>Required</i>	
• Attach documentation of the problem. (A. 4.)	<i>Required</i>	
• Extent project will solve the problem & Commitment by service providers. (A. 5.)	<i>Required</i>	
• Description of <b>each</b> service to be provided. (A. 6)	<i>Required</i>	
• ADA accessibility issue. (A. 7.)	<i>See instructions</i>	
• Chart for Documentation of Problem and Commitment to Provide Services. (A. 8)	<i>Required</i>	
• Copies of documentation to substantiate 1) severity of need, and 2) service provider commitments (must be on service provider organization letterhead). (A. 8.)	<i>Required</i>	
• Targeted Income Group Benefit (B. 1. – 3.)	<i>Required</i>	
• Attach documentation for TIG Benefit	<i>See instructions</i>	
• Sources and Uses Form (C. 1.)	<i>Required</i>	
• Program Readiness Chart (Part D.)	<i>Required</i>	
• Required Maps (Ethnic/TIG, Location, Project Site) (Part E.)	<i>Required</i>	
<b>OTHER:</b>		

## Public Works

<b>REQUIRED ACTIVITY FORMS</b>		
<i>Note: Use this checklist only if you are applying for the named activity.</i>		
Title	Required or optional	App. Page #(s)
• Need for Activity (A. 1.)	<i>Required</i>	
• Project Description (A. 2. a.)	<i>Required</i>	
• Site Control (required for Housing New Construction, Housing Acquisition, Community Facilities, and Public Works) (A. 2. b.)	<i>Required</i>	
• Site Control documentation (if applicable)	<i>Required</i>	
• Environmental Clearance (anticipated) (A. 2. c.)	<i>Required</i>	
• Description of severe health and safety need to be addressed by this activity. (A. 3. a.)	<i>Required</i>	
• Likelihood of reducing or eliminating the problem. (A. 3. b.)	<i>Required</i>	
• Plans to provide for long-term operation/maintenance. (A. 3. c.)	<i>Required</i>	
• How was health and safety need determined? (A. 4.)	<i>Required</i>	
• Documentation of Problem. (A. 5.)	<i>Required</i>	
• Attach documentation to show health and safety need. (A. 4.- 5.)	<i>Required</i>	
• Targeted Income Group Benefit (B. 1. – 3.)	<i>Required</i>	
• Attach documentation for TIG Benefit	<i>See instructions</i>	
• Sources and Uses Form (C. 1.)	<i>Required</i>	
• Program Readiness Chart (Part D.)	<i>Required</i>	
• Required Maps (Ethnic/TIG, Location, Project Site) (Part E.)	<i>Required</i>	
<b>OTHER:</b>		

# **Planning Activities & 10% Set-Aside**

<b>REQUIRED ACTIVITY FORMS</b>		
<i>Note: Use this checklist only if you are applying for the named activity.</i>		
<b>Title</b>	<b>Required or optional</b>	<b>App. Page #(s)</b>
<b>Planning Activities (Colonias Only)</b>		
• Planning Activity Description	<i>Required</i>	
• TIG Benefit	<i>Required</i>	
• TIG Benefit Documentation	<i>See instructions</i>	
• Survey Information	<i>See instructions</i>	
<b>10% Set-Aside (Not applicable for Colonias)</b>		
• 10% Set-Aside Activity Description	<i>Required</i>	
• TIG Benefit	<i>Required</i>	
• TIG Benefit Documentation	<i>See instructions</i>	
• Survey Information	<i>See instructions</i>	
•		

# **Other Documentation Required for All Activities**

<b>OTHER - Required Documentation</b>		
<b>The following should be placed in the inner front binder pocket of the “Original” application.</b>		
• One additional copy of authorizing Resolution(s)	<i>Required</i>	
• Two additional copies of all completed forms in Part A. and Part B. of the application.	<i>Required</i>	
• One additional copy of the Census Tables	<i>Required</i>	
<b>OTHER Attachments (list any additional attachments by name and page number)</b>		

### **A. 1. Application Information**

**Applicant:**   ☐ City of \_\_\_\_\_ located in the County of \_\_\_\_\_.

☐ County of \_\_\_\_\_

**Applying:**    ☐ On Applicant's Own Behalf                    **OR**            ☐ Joint Application with:

\_\_\_\_\_

**Total Amount of Funds Requested (for this application only):**

\$

### **A. 2. Type of Application**

This application is for the following funding Allocation:

☐ **General**

☐ **Colonias**

☐ **Native American**

*Note: Applicants applying for more than one funding Allocation must submit a separate application for each Allocation.*

### **A. 3. Official(s) Authorized to Submit Application and Sign the Grant Agreement (if funded) per the Resolution:**

Name:    (First)   (MI)    (Last)

Title:

Mailing Address:    (Street or P.O. Box)

(City)

(State)

(Zip)

Telephone Number:

Fax Number:

E-Mail Address:

(    )

(    )

**Signature:**

**Date:**

**For Applications from more than one jurisdiction (complete the following):**

Name:    (First)   (MI)    (Last)

Title:

Mailing Address:    (Street or P.O. Box)

(City)

(State)

(Zip)

Telephone Number:

Fax Number:

E-Mail Address:

(    )

(    )

**Signature:**

**Date:**

**A. 4. City/County Staff Contact Information****The person listed can be contacted for the following purpose(s):**☐ Application Clarification Questions☐ Application Funding Notification

Name: (First) (MI) (Last)

Title:

Mailing Address: (Street or P.O. Box) (City) (State) (Zip)

Telephone Number:

Fax Number:

E-Mail Address:

( )

( )

**A. 5. Consultant/Program Operator/Other Public Agency Contact Information****The person listed can be contacted for the following purpose(s):**☐ Application Clarification Questions☐ Application Funding Notification

Name: (First) (MI) (Last)

Title:

Agency Name:

Mailing Address: (Street or P.O. Box) (City) (State) (Zip)

Telephone Number:

Fax Number:

E-Mail Address:

( )

( )

## A. 6. Funding Requested (by activity)

Activity	Amount Requested	Program Operator	Result of CDBG Planning/TA Grant?
<b>General Administration</b>	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	
<b>Housing - New Construction</b>			
Owner-Occupied	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
Renter-Occupied	\$		<input type="checkbox"/> No
Activity Delivery	\$		
<b>Activity TOTAL</b>	\$		
<b>Housing - Acquisition</b>			
Owner-Occupied	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
Renter-Occupied	\$		<input type="checkbox"/> No
Activity Delivery	\$		
<b>Activity TOTAL</b>	\$		
<b>Housing – Rehabilitation - Single Unit</b>			
Owner-Occupied	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
Renter-Occupied	\$		<input type="checkbox"/> No
Activity Delivery	\$		
<b>Activity TOTAL</b>	\$		
<b>Housing – Rehabilitation - Multi Unit</b>			
Owner-Occupied	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
Renter-Occupied	\$		<input type="checkbox"/> No
Activity Delivery	\$		
<b>Activity TOTAL</b>	\$		
<b>Community Facilities</b>			
Community Facilities	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
Activity Delivery	\$		<input type="checkbox"/> No
<b>Activity TOTAL</b>	\$		
<b>Public Services</b>			
Public Services	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
Activity Delivery	\$		<input type="checkbox"/> No
<b>Activity TOTAL</b>	\$		
<b>Public Works</b>			
Public Works	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
Activity Delivery	\$		<input type="checkbox"/> No
<b>Activity TOTAL</b>	\$		
<b>Planning Activities (Only for Colonia applicants)</b>			
Planning	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
<b>Activity TOTAL</b>	\$		<input type="checkbox"/> No
<b>10% Set-Aside (Not applicable for Colonia applicants)</b>			
10% Set-Aside	\$	<input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Yes
Activity Delivery	\$		<input type="checkbox"/> No
<b>Activity TOTAL</b>	\$		
<b>TOTAL Funding Requested</b>	\$		

<b>A. 7. Census Data (by activity)</b>		
<b>List Proposed Activity Name(s):</b> (Colonias Applicants also identify Colonia(s) to be served)	<b>Jurisdiction-wide/ Target Area</b>	<b>Census Tract Numbers (all apps.) &amp; Block Group Numbers (for target area activities only)</b>
<b>1.</b>	<input type="checkbox"/> Jurisdiction-wide  <input type="checkbox"/> Target Area	
<b>2.</b>	<input type="checkbox"/> Jurisdiction-wide  <input type="checkbox"/> Target Area	
<b>3.</b>	<input type="checkbox"/> Jurisdiction-wide  <input type="checkbox"/> Target Area	
<b>4.</b>	<input type="checkbox"/> Jurisdiction-wide  <input type="checkbox"/> Target Area	
<b>5.</b>	<input type="checkbox"/> Jurisdiction-wide  <input type="checkbox"/> Target Area	



**A. 8. Proposed Activity(ies) and Beneficiaries by Income Group**

	A. 81% & Above (Non-TIG)		B. Between 51% - 80% (TIG)		C. Below 50% (LTIG) (There must <u>not</u> be a zero in this section.)		D. Beneficiary TOTALS By Activity	
	# of Beneficiaries		# of Beneficiaries		# of Beneficiaries		Total Number of:	
Activity ↓	Households/ Projects	Persons	Households/ Projects	Persons	Households/ Projects	Persons	Households/ Projects	Persons
Housing – New Construction (Owner-Occupied)								
Housing – New Construction (Renter-Occupied)								
Housing – Acquisition (Owner-Occupied)								
Housing – Acquisition (Renter-Occupied)								
Housing – Single- Unit Rehabilitation (Owner-Occupied)								
Housing – Single- Unit Rehabilitation (Renter-Occupied)								
Housing – Multi-Unit Rehabilitation (Owner-Occupied)								
Housing – Multi-Unit Rehabilitation (Renter-Occupied)								
Community Facilities								
Public Services								
Public Works								
Planning (for Colonias Only)								
10% Set-Aside (not for Colonias)								

<b>A. 9. Legislative Representatives</b>		
<b>Member of the Assembly</b>	<b>State Senator</b>	<b>Member of Congress</b>
1. District No.	1. District No.	1. District No.
2. Name:	2. Name:	2. Name:
3. Capitol Room #:	3. Capitol Room #:	3. Office Bldg. and address:
1. District No.	1. District No.	1. District No.
2. Name:	2. Name:	2. Name:
3. Capitol Room #:	3. Capitol Room #:	3. Office Bldg. and address:

**B. 1. Resolution of the Governing Body** *This document is required.* See sample in Appendix D.

The Resolution submitted with this application must:

- ☐ be an **original or an original certified copy** of the Resolution; and
- ☐ authorize submission of the application; and
- ☐ approve the application's contents (funding requested, activities, committed leverage, etc.); and
- ☐ authorize its execution (and any amendments thereto); and
- ☐ designate a person authorized to enter into an agreement, if funded.

CDBG strongly recommends that applicants use the suggested language in the sample (Appendix D).

**B. 2. Statement of Assurances.** *This document is required.*

All applicants must use the form provided by the State (See Appendix C). Original signature is required.

**B. 3. Housing Element Status.** *This information is required.*

Has the applicant submitted an adopted housing element to the department?

- ☐ Yes. If yes, complete and attach a self-certification that the housing element is in procedural compliance with State housing element law. See Appendix A for the **required** self-certification form language. Original signature is required for Original Application set.
- ☐ No. (See note below)

**NOTE:** *The Department will not award funds to any applicant who has not submitted the self-certification by April 4, 2003. The self-certification must be received by HCD, not postmarked, by April 4, 2003. No extensions will be granted beyond that date.*

**B. 4. Growth Control.** *This information is required.*

Has the applicant enacted limitations on residential construction, which limitations are not establishing agricultural preserves, not imposed by another agency, or not based on a health and safety need?

- ☐ Yes. If yes, see note below.
- ☐ No.

**NOTE:** If the applicant has a General Plan, ordinance, or other measure which directly limits by number either the building permits which may be issued for residential construction, or buildable lots which may be developed for residential purposes, and the measure does not meet any of the exceptions found in the Program Regulations, Section 7056 (b)(2)(B), check "Yes" and attach a copy of the measure in this section of the application.

**B. 5. Citizen Participation. *This information is required.***

The Program's Public Hearings/Citizen Participation requirements are described in the 2002 CDBG Grant Management Manual, Chapter 18. Use this section of the application to make sure you have met these requirements.

- ☐ Public hearing was conducted during the program design phase of the application.
- ☐ Public hearing was conducted (at least 30 days after program design phase hearing) to approve submittal of the application.
- ☐ Public Notices announcing the public hearings were published in a local newspaper and contained the required information, as stated in the 2002 CDBG Grant Management Manual.
- ☐ Sign-in sheets are available for each public hearing.
- Did the jurisdiction receive written comments during the public hearings process prior to submitting this application?
  - ☐ Yes. See note below.
  - ☐ No

If a jurisdiction received written comments as part of the public hearings process prior to submitting the CDBG application, a copy of the comments must be submitted with the application. In addition, the jurisdiction's response must also be included.

Be sure to make an entry on the Application Checklist.

**B. 6. Joint Powers Agreement. *This form may be required.***

An Agreement is required by the CDBG Regulations, Section 7060(c) as part of an application on behalf of another jurisdiction or for joint applications. Applicants must prepare an Agreement if the following conditions exist:

- if one application is submitted by two or more jurisdictions, or
- if a county is applying on behalf of a city in the same county, or
- if a county applicant is applying on behalf of itself and a city in the same county

Section 7060(c) provides that such agreements must be on forms provided by the Department. Contact your CDBG Representative to obtain a copy.

Additional provisions may be added by applicants either by attachments to the agreement or by typing additional provisions or exceptions into the spaces provided on the form. Space has been left between each paragraph for applicants to modify any provisions to fit the applicant's particular situation. The applicant should enter "not applicable" if a provision clearly has no meaning in light of the activities proposed. Do not leave any lines blank.

If the applicant proposes to create a separate Joint Powers agency, the Department must be consulted regarding the inclusion of legal requirements.

## B. 7. NEPA Environmental Certification.

If the proposed activity will include administration, engineering, architectural, or other related services prior to project implementation, the jurisdiction must prepare a Finding of Exemption before beginning work on any of these services (such services are exempt under Part 58.34 of the Federal environmental regulations pertaining to CDBG recipients).

The jurisdiction may choose to provide this environmental certification with this application. If this application is funded, provision of this certification will expedite commencement of service work upon execution of the State contract.

**Additional environmental review documents will be needed after contract execution for other phases of project implementation.**

### Finding of Exemption

It is the finding of the City/County of \_\_\_\_\_ that the activities proposed in this application for State Community Development Block Grant funds are exempt from environmental review requirements under NEPA because they are defined as exempt activities in 24 CFR Part 58.34. The activity(ies) judged exempt consist(s) of:

#### Brief Description of Activities:

#### NEPA Citation

\_\_\_\_\_ General Administration Activities

58.34 (a) (3)

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

Print/Type Name of Authorized Official

Title

Signature

Date



Pacific/Hawaii Office  
450 Golden Gate Avenue  
San Francisco, California 94102-3448

**PROJECT NAME / DESCRIPTION:**

**Level of Environmental Review Determination:** \_\_\_\_\_

(Exempt per 24 CFR 58.34, Categorically excluded not subject to statutes per § 58.35(b), Categorically excluded subject to statutes per § 58.35(a), Environmental Assessment per § 58.36, or EIS per 40 CFR 1500)

**STATUTES and REGULATIONS listed at 24 CFR 58.6**

**FLOOD DISASTER PROTECTION ACT**

1. Does the project involve acquisition, construction or rehabilitation of structures located in a FEMA-identified Special Flood Hazard?

☐ No; Cite Source Document: \_\_\_\_\_

\_\_\_\_\_  
(This factor is completed).

☐ Yes; Source Document: \_\_\_\_\_ (Proceed).

2. Is the community participating in the National Insurance Program (or has less than one year passed since FEMA notification of Special Flood Hazards)?

☐ Yes (Flood Insurance under the National Flood Insurance Program must be obtained and maintained for the economic life of the project, in the amount of the total project cost. A copy of the flood insurance policy declaration must be kept on file).

☐ No (Federal assistance may not be used in the Special Flood Hazards Area).

**COASTAL BARRIERS RESOURCES ACT**

1. Is the project located in a coastal barrier resource area?

☐ No; Cite Source Documentation: \_\_\_\_\_

\_\_\_\_\_  
(This element is completed).

☐ Yes - Federal assistance may not be used in such an area.

**AIRPORT RUNWAY CLEAR ZONES AND CLEAR ZONES DISCLOSURES**

1. Does the project involve the sale or acquisition of existing property within a Civil Airport's Runway Clear Zone or a Military Installation's Clear Zone?

☐ No; SD \_\_\_\_\_ Project complies with 24 CFR 51.303(a)(3).

☐ Yes; **Disclosure statement must be provided** to buyer and a copy of the signed disclosure must be maintained in this Environmental Review Record.

\_\_\_\_\_  
Preparer Signature / Name /Date

\_\_\_\_\_  
Responsible Entity Official Signature / Name / Date

### C. 1. Capacity

1. **General Allocation Applicants:** Do you have any CDBG General grants for the years 1999, 2000, 2001 or 2002?

**Native American Applicants:** Do you have any CDBG Native American grants for the years 1999, 2000, 2001 or 2002?

**Colonias Applicants:** Do you have any CDBG Colonias grants for the years 1998, 1999, 2000 or 2001?

☐ **Yes.** Specify which year(s): \_\_\_\_\_. **Skip** question #2.

☐ **No.** Continue to question #2 below.

2. If funded from this application, how will you administer the grant? **You must attach supporting documentation for this part of the application.**

☐ With in-house staff only. (*Attach resumes and duty statements of staff that will be performing the work.*)

☐ With program operator services only.

- *Attach a letter of interest from the program operator that includes a brief description of experience administering CDBG projects.*
- *Neighboring jurisdictions that have previously administered a CDBG project are considered program operators for purposes of this question.*
- *If funded, the Grantee will be required to enter into a contract or subrecipient agreement, as applicable, with the program operator.*

☐ Some combination of in-house and consultant services. Describe below. (*Attach resumes, duty statements, letters, etc. as indicated above.*)

## C. 2. Other Funding Sources - LOCAL

**Please identify other funding sources (local), for all activities included in this application. (To be considered as leverage, funding must be committed.)**

[illegible]





**C. 4. Other Funding Sources - STATE (cannot be counted as leverage for ranking purposes)**

 Please identify other funding sources (State), for all activities included in this application.

Name of CDBG Activity	Use of Funds	Source of Funds (Identify Source)	Funding Type (loan, grant, in-kind, fee waivers, etc.)	Dollar Amount	Committed? (Yes/no)
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

**C. 5. Other Funding Sources – Other FEDERAL (cannot be counted as leverage for ranking purposes)**

Please identify other funding sources (Federal), for all activities included in this application.

Name of CDBG Activity	Use of Funds	Source of Funds (Identify Source)	Funding Type (loan, grant, in-kind, fee waivers, etc.)	Dollar Amount	Committed? (Yes/no)
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

### C. 6. Program Income

1. Enter the total amount of Program Income on account  
as of December 31, 2002:

\$ \_\_\_\_\_

2. Enter the amount of Program Income that has been committed to each of the following:

a. Activities/projects proposed in <b><u>this</u></b> <b><u>application</u></b> . Identify activities:	<b>Use of Funds</b> (General admin. activity delivery, the activity)		<b>Dollar Amount Committed</b> (per Resolution)
b. Activities/projects <b>different than</b> those proposed in <b><u>this</u></b> <b><u>application</u></b> . Identify activities:	<b>Use of Funds</b> (General admin. activity delivery, the activity)	Identify the CDBG National Objectives to be met	<b>Dollar Amount Committed</b> (per Resolution)

3. Total Dollar Amount of Program Income funds **Committed: (a. + b.)**

\$ \_\_\_\_\_

<b>ACTIVITY DESCRIPTION FORMS</b>
-----------------------------------

This section of the application contains six color-coded sets of forms with Instructions. Most entries are self-explanatory. Where instructions are needed, they are located in front of each color-coded section.

Green:	Housing--New Construction
Pink:	Housing--Acquisition
Tan:	Housing--Rehabilitation
Blue:	Public Services
Orange	Community Facilities
Yellow:	Public Works
Grey:	Planning Activities ( <u>for Colonias only</u> )
Buff:	10% Set-Aside Activity ( <b>Not</b> applicable for Colonias)

How to proceed:

1. Select the category of activity you wish to propose. You may apply for more than one activity.
2. Pull the appropriate color-coded sections of the application for the activities you are proposing. Please review the Instructions before filling out the forms.
3. Complete all parts of the application. Photocopy additional pages as needed.
4. Review the Activity Checklist(s) to be sure you have included all the required and necessary documentation for each activity that is included in this application.

**A. NEED FOR THE ACTIVITY.**

1. Eligible uses of funds. Applicants should refer to the NOFA and Federal Regulations for more information on the items listed as potential housing new construction uses for CDBG funds. Restrictions apply to using CDBG funds for New Construction. Please contact your CDBG Representative if you have any questions about these listed items.

Notes for specific items:

- Activity costs -- Actual construction costs or site improvements, or site improvements to publicly owned land. These activities are allowed only under the limited conditions found in the NOFA, Appendix D.
  - Soft costs--applications for funding of project. Under certain conditions, applicants may use CDBG General Administration funds to pay for the costs associated with applying for other funding commitments for this project. Any applicant who intends to apply for other funds for the proposed project will be subject to special conditions in the State contract regarding the timeframes for obtaining these other commitments.
  - Soft costs--processing fees. Under certain conditions, applicants may use CDBG General Administration funds to pay processing fees. The Federal Regulations describe these as fees associated with processing of applications for mortgage or insured loan commitments under programs including those administered by HUD, U. S. Department of Agriculture, Federal National Mortgage Association (FNMA), and the Government National Mortgage Association (GNMA).
2. Description. Project description, State objective points, site control, and environmental clearance information.
    - a. Narrative Description. Provide a brief narrative about the proposed project. Give information about the use of CDBG funds, what the total project will cost, the number of units, and a breakdown of the projected TIG and LTIG beneficiaries.

If you are proposing a combination of activities or uses, explain all aspects of these combinations and break out costs where appropriate. If you are proposing a multi-year project, explain why the activity cannot be accomplished in one funding cycle. If the proposed activity is part of a larger project, please describe the whole project and how the CDBG-funded portion fits into that project. Remember that the completion of construction and occupancy by the TIG/LTIG beneficiaries must occur by CDBG contract expiration.

Single-family example: The City of XYZ will use the \$500,000 to increase the capacity of water and wastewater mains in support of the development of 22 self-help homes for 15 TIG and 7 LTIG households. The CDBG funds will be used as part of a \$3.5 million, 50-unit, self-help subdivision being constructed in the northwest portion of the City. Other funds are being provided by USDA-RD and the ABC Bank Community Reinvestment fund.

Multi-family example: The City of UVW will use the \$300,000 to assist the NP Housing Development Corporation (NPHDC) to purchase a site on which it will develop 30 units of senior citizen rental housing for 10 LTIG and 20 TIG households. The balance of funding for this \$2,500,000 project will be provided by a HUD 202 grant (\$2,000,000), FHLB Affordable Housing Program (\$150,000) and NPHDC's developer equity (\$50,000).

- d. Environmental Clearance. Describe the actual (if known) or estimated level of National Environmental Policy Act (NEPA) environmental clearance. Scheduling and budgeting should allow for sufficient time and funds to complete environmental clearances prior to commencement of activities. New Construction frequently requires a higher level of NEPA environmental clearance than other types of community development activities.

If you already have a NEPA environmental review record (ERR) for your proposed project that was prepared by or for another agency (e.g., USDA-RD), that ERR may or may not satisfy environmental review requirements for HUD purposes for this grant application. Please contact your CDBG representative for further guidance on avoiding ERR duplication.

3. Overpayment. You **must** use 1990 Census data for this number. Overpayment data are available in the 1990 Census Summary Tape File 3A, Table H50 (see sample of this table in Appendix G). If you are unable to obtain this Table, please ask your CDBG Representative for a copy.
4. Overcrowding. Overcrowding means 1.01 or more persons per room. You **must** use 1990 Census data for this number. Overcrowding data are available in the 1990 Census Summary Tape File 1A, Table H21 (see sample of this table in Appendix G). If you are unable to obtain this Table, please ask your CDBG Representative for a copy.

5. Need for New Units.

- a. & b. Homeowner/Rental Vacancy Rates. CDBG will allow the designation of Target Area for this activity only for County applicants where the proposed project is in a geographically isolated area of the county. Recent surveys or Census data are acceptable documentation.

If you use 1990 Census data, refer to the Census Summary Tape File 1A, General Profiles (see sample of this table in Appendix G) for the jurisdiction-wide vacancy rates by tenure type. If you wish to use Census data but are unable to obtain the required Table, please ask your CDBG Representative for a copy.

6. Please check whether you have a project-specific waiting list or market study. If you check “yes,” attach a copy.
7. Supplemental information. If the Census data for Overpayment or Overcrowding do not accurately depict your community’s need in those categories, please attach third-party documentation, if available, showing your community’s worsened needs in either of those categories and tell us the page number. Such supplemental information may not be older than five years from this year’s application filing date and **must be specific to the community**.

Note: Vacancy rate data cannot be supplemented, as recent surveys are already allowed as noted above under “Need for New Units.”

**B. TARGETED INCOME GROUP BENEFIT**

1. In the space provided, enter the percentage of the total project beneficiaries who would be TIG households.

Next, follow the prompts for #2 through #5 (if applicable).

5. Compare the percent of benefit to TIG households with the percent of CDBG dollars relative to the total development cost (TDC). For example, a potential \$1,000,000 project may be designed to set aside 40 percent of the finished project for TIG households. If the applicant is requesting \$400,000 of CDBG funds, which is 40 percent of the TDC, then the application meets the test that the percent benefit to TIG households is equal to or greater than the percent of TDC that CDBG dollars represent.



## C. SOURCES AND USES

### 1. Sources and Uses Form.

Sources. The major funding sources are printed on the form.

The amounts and sources for local and private funding contributions should match the information provided on the charts for “Other Funding Sources,” pages 35-38. In addition, make entries here for any State, Federal, or other sources, that you will be using to finance the entire project.

For "other State" funds, if any are from another HCD program, please identify that program on this chart.

Uses. Identify the cost categories applicable to your proposed project and enter the amounts you plan to use. Allocate the amounts across the table to the funds you expect to receive from all the sources listed. This chart should include costs for the entire project (not just the CDBG portion). Your cost estimates can assist you in calculating these entries.

- For the Construction lines, include a factor for Davis-Bacon wages when applicable. All construction costs should include a contingency established in the line item.
- The Equipment category could include items such as outdoor playground equipment.
- Examples of fees that should be listed are commissions to brokers or closing costs for the acquisition of land or a building.
- General administration costs should include staff time for grant administration, such as clearing the grant agreement special conditions and grant reporting.
- Activity delivery costs should include the costs which the State CDBG Program would consider activity delivery.

***Please double-check the totals, in all rows and columns, for accuracy.***

**D. PROGRAM READINESS**

Of the 150 points available for capacity, your application may be awarded up to 50 points if you complete and document actions that make the proposed project ready to proceed. These actions must be directly related to the activity. They may include the completion of the special condition and environmental review requirements, securing site control, securing financing for the entire project, or anything that would enable the applicant to be ready to proceed.

A partial list of Examples of such actions and the documentation to be submitted for each are in the Program Readiness Chart. (This is not a complete list of possible actions.)

**E. REQUIRED MAPS.**

Include all required maps at the end of each activity section for which you are applying.

**A. NEED FOR ACTIVITY**

1. What will the CDBG dollars be used for? *(Please see Appendix D of the NOFA for detailed description and limitations of these eligible uses.) Check all that apply.*

**a. Support Costs**

1. Activity Costs

- ☐ Acquisition of site(s)
- ☐ Site Clearance
- ☐ Site Improvements to publicly owned land\*
- ☐ Off-site improvements *(the improvements must be required as a condition of project approval, attach documentation)*
- ☐ Actual construction costs or site improvements\*

2. Soft Costs

- ☐ Site and utility plans, etc.
- ☐ Application(s) to obtain other necessary funding for this project\*
- ☐ Mortgage/loan commitment application processing fees\*

*See Instructions for more information on each of these starred items.*

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**b. Construction Costs:**

- ☐ Last resort housing
- ☐ A Community Based Development Organization's (CBDO) neighborhood revitalization project
- ☐ A housing construction project which is assistance to a neighborhood-based nonprofit organization, local development corporation or nonprofit organization serving the development needs of a community in a non-entitlement area
- ☐ A Housing Development Grant (HODAG) new construction project
- ☐ Soft costs *(those costs listed under a.2. above may be considered activity costs when carried out in conjunction with any of the other four activities listed in this section b.)*

---

**c. Other. Evaluated as new housing construction:**

- ☐ Acquisition of rental housing, the majority of which is unoccupied, including rehabilitation
  - ☐ Conversion of buildings to housing units (adaptive use)
-

2. Project description, State objective points, site control, and environmental clearance.

a. Briefly describe the project.

---

b. State Objectives: Please answer the questions below and attach documentation if you believe you should receive points for State Objectives as described in the 2003 NOFA.

**Worst Case Housing Needs:** Will this proposal facilitate the construction, acquisition, or rehabilitation of permanent housing projects that meet all of the following requirements?

1. must be rental housing.
2. must target at least 25 percent of the program beneficiaries to be LTIG households who do not receive Federal housing assistance, and
3. must reduce these beneficiaries' rent and utility costs to below 50 percent of their gross incomes, or benefit persons who live in severely substandard housing.

Note: For the purposes of this State Objective, permanent means that residents' tenure in the housing will not be limited to a certain time period.

☐ Yes      ☐ No

**Farmworker Housing:** Does this activity facilitate the construction of permanent housing for farmworkers or the provision of health services in combination with permanent or seasonal housing for farmworkers?

☐ Yes      ☐ No

**Infrastructure Proposals:** Does this activity include using CDBG funds to pay for public infrastructure in support of housing?

☐ Yes      ☐ No

If yes, include the amount as "Construction off-site" on the sources and uses chart, page 52.

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- c. Site control. If the proposed project involves site acquisition, please answer the following question. ***Note: Site acquisition costs incurred prior to the award of a grant, execution of a grant agreement, and satisfaction of any special conditions are not reimbursable from the grant.*** Examples of site control include an option to purchase or a purchase agreement, an option to lease or a leasehold interest, or a deed of trust. Include documentation that rights of way or easements have been obtained.

Do you have site control in place for at least 6 to 9 months beyond the anticipated CDBG award date in order to allow time to complete CDBG special conditions and escrow procedures?

- ☐ Yes. Attach documentation.      ☐ No. Explain below.

- 
- d. Environmental clearance. Describe the anticipated level of environmental clearance under the National Environmental Policy Act (NEPA).
-

**Housing New Construction  
2003 CDBG Application**

<b>Data Type</b>	<b>Instructions:</b>	<b>Percentage</b>	<b>Data Source</b>
<b>3. <u>Overpayment</u></b>	Enter the percentage of all renter households who are paying more than 25% of income for housing. <i>Please show calculations on your attached Census table.</i>	___%	1990 Census Data
<b>4. <u>Overcrowding</u></b>	Enter the percentage of total households who are overcrowded. <i>Please show calculations on your attached Census table.</i>	___%	1990 Census Data
<b>5. Need for New Units</b>	Below, enter the vacancy rate for the tenancy type(s) proposed (homeowner and/or rental).	<b>Percentage</b>	<b>Below, specify if data is from 1990 Census or local survey.</b>
a. <b><u>Homeowner Vacancy Rate</u></b>	Enter the percent(s) of units that are vacant in the entire jurisdiction. <i>Attach the Census tables and/or the results of the local survey, if applicable.</i>	___%	<input type="checkbox"/> 1990 Census <input type="checkbox"/> Local Survey
b. <b><u>Rental Vacancy Rate</u></b>	Enter the percent(s) of units that are vacant in the entire jurisdiction. <i>Attach the Census tables and/or the results of the local survey, if applicable.</i>	___%	<input type="checkbox"/> 1990 Census <input type="checkbox"/> Local Survey
<b>Note:</b> The Council of Governments' (COGs) needs figures for new low- and very low-income units will be analyzed as a percentage of current number of units in the community. The data for this factor have been independently obtained by the Department. If you would like a list of eligible jurisdictions and their COG needs factors, please contact CDBG at the telephone number on the cover of this application.			

6. Is there project-specific waiting list or market study?    ☐ Yes, attach a copy.    ☐ No

7. Supplemental information. Please describe and attach third party documentation, if available. Also, describe how this information directly affects your community's worsened overpayment and/or overcrowding needs. In addition, indicate the page numbers where the documentation can be found in the application
- ☐ Worsened Overpayment: Information rebutting or not captured in the Census.
  - ☐ Housing Overcrowding: Information rebutting or not captured in the Census.
-

**B. TARGETED INCOME GROUP BENEFIT.**

1. What percentage of households benefiting from this proposed activity are TIG \_\_\_\_\_ % households?

If you are proposing assistance for development of individual-ownership housing, STOP HERE. (You **must** have 100% TIG benefit.)

If you are proposing assistance for development of rental housing, CONTINUE.

2. If your answer to question #1 is 51% or greater, STOP HERE.  
 If your answer to question # 1 is less than 51%, CONTINUE.

3. Do you propose to assist a senior housing project?      \_\_\_ **Yes.** STOP HERE. Your project does not meet the TIG National Objective and is ineligible.  
    \_\_\_ **No.** CONTINUE.

4. Is the answer to question #1 less than 20%?      \_\_\_ **Yes.** STOP HERE. Your project does not meet the TIG National Objective and is ineligible.  
    \_\_\_ **No.** CONTINUE.

5. Is the percentage of CDBG dollars relevant to development costs equal to or less than the percentage of TIG households in the project?      \_\_\_ **Yes.** Your project meets the TIG National Objective for this activity.  
    \_\_\_ **No.** Your project does not meet the TIG National Objective and is ineligible.



**Housing New Construction  
2003 CDBG Application**

**C. 1. Sources and Uses Form.** Show all funds you plan to use: the CDBG funds applied for and all other funding sources that will be used on the entire project.

**SOURCES**

Uses	State CDBG	Local Financial	Private Financial	Program Income	Federal	Other State	Other (List )	Total
Land Acquisition								
Building Acquisition								
Construction On-site								
Construction Off-site								
Equipment								
Final Plans & Specs								
Fees								
Contingency								
General Administration								
Activity Delivery								
Relocation								
Planning								
Other:								
Other:								
Totals								

**D. PROGRAM READINESS CHART - (Housing New Construction)**

<b>PROGRAM OPERATOR</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
In-House Procurement			
Sub-recipient Agreement*			
Subrecipient Letter of Interest			
Procurement*			

**\*Contract should be conditioned upon receipt of award**

<b>ENVIRONMENTAL</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Environmental Assessment			
Partial Environmental Assessment			

<b>SITE CONTROL</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Proof of Ownership			
Purchase Option*			
Other:			

<b>SPECIAL CONDITIONS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Program Guidelines			
Anti-Displacement			
PI Re-Use Plan			

<b>PROJECT FINANCING</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
All Financing Approved			
Financing Partially Approved			

**Housing New Construction  
2003 CDBG Application**

<b>READINESS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Plans and Specifications			
Local Government Approvals			
Detailed Project Budget			
Developer List			
Bid Package			
List of Qualified Homebuyers or Renters			
Other:			

**E. REQUIRED MAPS.**

Please read the instructions below and return the requested information with your application.  
**If you are proposing multiple activities, please provide separate maps for each activity.**

- ✓ **Ethnic/TIG concentration maps.** Based on the applicant's knowledge of the area and available data, provide a legible map of the jurisdiction that shows:
  - the location of concentrations of non-white persons and Hispanic persons within the entire city or county, and
  - the location of concentrations of targeted income group families within the jurisdiction.
  
- ✓ **Location map.** The location map must be legible and must include:
  - the numbers and boundaries of census tract(s) or census block group(s) within which CDBG funds will be spent, and
  - the general location of the proposed activities, including geographic boundaries of the target or service areas covered by each activity.
  
- ✓ **Project site map.** For site specific activities, include a project site map which shows:
  - location and size of existing and proposed infrastructure (road, water, sewer, etc.), if applicable or pertinent.

**A. NEED FOR THE ACTIVITY.**

2. Description. Project description, site control, and environmental clearance information.

- a. Narrative Description. Provide a brief narrative about the proposed project. Give information about the use of CDBG funds, what the total project will cost, the number of units, and a breakdown of the projected TIG and LTIG beneficiaries.

If you are proposing a combination of activities or uses, explain all aspects of these combinations. If you are proposing a multi-year project, explain why the activity cannot be accomplished in one funding cycle. If the proposed activity is part of a larger project, please describe the whole project and how the CDBG-funded portion fits into that project. Remember that the completion of construction and occupancy by the TIG/LTIG beneficiaries must occur by CDBG contract expiration.

Single-family example: The City of XYZ will use the \$400,000 to assist 15 homebuyers to purchase existing homes. It is anticipated that 12 of the homebuyers will be TIG and the remaining 3 will be LTIG households. We anticipate that the average purchase price will be \$110,000 plus closing costs of \$3,000; the average CDBG loan will be \$25,000; the average downpayment will be \$3,500; and the average bank loan will be \$81,500. The CDBG funds will be used in conjunction with bank loans obtained individually by the homebuyers. A letter of interest from MNO Bank is attached to document the bank funds as leverage.

Multi-family example: The County of PQR will use the \$500,000 to assist the NP Housing Development Corporation (NPHDC) to purchase a rental housing project consisting of 50 units, located in the rural Vista community in the Northwest area of the County. These units are currently occupied by 10 LTIG and 40 TIG households, and we expect this mix to be maintained. The balance of funding for this \$2,000,000 project will be provided by a CHFA loan in the amount of \$1,400,000 and a FHLB Affordable Housing Program grant of \$100,000. No rehabilitation funds are needed, as the project currently meets all code requirements.

- d. Environmental Clearance. Describe the actual (if known) or estimated level of National Environmental Policy Act (NEPA) clearance. Scheduling and budgeting should allow for sufficient time and funds to complete environmental clearances prior to commencement of activities.

If you already have a NEPA environmental review record (ERR) for your proposed project that was prepared by or for another agency (e.g., USDA-RD), this ERR may or may not satisfy NEPA requirements for HUD purposes. Please contact your CDBG representative for further guidance on avoiding ERR duplication.

3. Overpayment. You must use 1990 Census data for this number. Overpayment data are available in the 1990 Census Summary Tape File 3A, Table H50 (see Sample in Appendix G). If you are unable to obtain this Table, please ask your CDBG Representative for a copy.
4. Overcrowding. Overcrowding means 1.01 or more persons per room. You must use 1990 Census data for this number. Overcrowding data are available in the 1990 Census Summary Tape File 1A, Table H21 (see sample in Appendix G). If you are unable to obtain this Table, please ask your CDBG Representative for a copy.
5. Need for Acquisition of Units.
  - a. For Rental Acquisition Projects: CDBG will allow the designation of Target Area for this activity only for County applicants where the proposed project is in a geographically isolated area of the county. Recent surveys or Census data are acceptable documentation. Use either the appropriate vacancy rate from the 1990 Census Summary Tape File 1A, General Profiles, or from a local survey. If you are unable to obtain the Census Table, please ask your CDBG Representative for a copy.

*Attach Census tables or the results or the local survey, as applicable.*

- b. For Homeownership Acquisition Programs: Use 1990 Census Summary Tape File 3A, General Profile, “Housing Characteristics” which contains “Occupied housing units” and “Specified owner-occupied housing units.”

Note: “Occupied housing units” is used because it equals the number of households in the jurisdiction, and it eliminates vacant units.

If you are unable to obtain the Census Table, please ask your CDBG Representative for a copy.

6. Supplemental information. If the Census data for Overpayment, Overcrowding, or Homeownership Rate do not accurately depict your community’s need in those categories, please attach third-party documentation, if available, showing your **community’s worsened needs** in either of these three categories and tell us the page numbers. Such supplemental information may not be older than five years from this year’s application filing date and must be specific to the community. Vacancy rate data for rental acquisition projects cannot be supplemented, as recent surveys are already allowed as noted above under “Need for Acquisition of Units,” 5. a.

## **B. TARGETED INCOME GROUP BENEFIT**

1. In the space provided, enter the percentage of the total project beneficiaries who would be TIG households.
2. If this is a non-senior project check “yes” if the TIG benefit is 51 percent or greater. Check “no” if fewer than 51 percent of the beneficiary households would be TIG households.
3. Answer yes if this is a non-senior, multi family project.
4. Compare the percent of benefit to TIG households with the percent of CDBG dollars relative to the total development cost (TDC). For example, a potential \$1,000,000 project may be designed to set aside 40 percent of the finished project for TIG households. If the applicant is requesting \$400,000 of CDBG funds, which is 40 percent of the TDC, then the application meets the test that the percent benefit to TIG households is equal to or great than the percent of TDC that CDBG dollars represent.

## **C. SOURCES AND USES**

### **1. Sources and Uses form.**

Sources. The major funding sources are printed on the form.

The amounts and sources for local and private funding contributions should match the information provided on the charts for “Other Funding Sources,” pages 35-38. In addition, make entries here for any State, Federal, or other sources, that you will be using to finance the entire project.

For "other State" funds, if any are from another HCD program, please identify that program on this chart.

Uses. Identify the cost categories applicable to your proposed project and enter the amounts you plan to use. Allocate the amounts across the table to the funds you expect to receive from all the sources listed. This chart should include costs for the entire project (not just the CDBG portion). Your cost estimates can assist you in calculating these entries.

- For the Construction lines, include a factor for Davis-Bacon wages when applicable. All construction costs should include a contingency established in the line item.
- The Equipment category could include items such as outdoor playground equipment.

- Examples of fees that should be listed are commissions to brokers or closing costs for the acquisition of land or a building.
- General administration costs should include staff time for grant administration, such as clearing the grant agreement special conditions and grant reporting.
- Activity delivery costs should include the costs which the State CDBG Program would consider activity delivery.

***Please double-check the totals, in all rows and columns, for accuracy.***

#### **D. PROGRAM READINESS**

Of the 150 points available for capacity, your application may be awarded up to 50 points if you complete and document actions that make the proposed project ready to proceed. These actions must be directly related to the activity. They may include the completion of the special condition and environmental review requirements, securing site control, securing financing for the entire project, or anything that would enable the applicant to be ready to proceed.

A partial list of Examples of such actions and the documentation to be submitted for each are in the Program Readiness Chart. (this is not a complete list of possible actions.)

#### **E. REQUIRED MAPS.**

Include all required maps at the end of each activity section for which you are applying.



**A. NEED FOR ACTIVITY**

1. What will the CDBG dollars be used for? *(Please see Appendix B of the NOFA for detailed description and limitations of these eligible uses.) Check all that apply.*

- ☐ Acquisition of existing rental housing, with the majority of units occupied  
☐ Homebuyer assistance (for units already built at the time of application)  
☐ Resident purchase of mobilehome parks  
☐ Housing rehabilitation (in conjunction with acquisition)  
☐ Other, explain:

2. Project description, State Objectives, site control, and environmental clearance.

- a. Briefly describe the project.

- b. State Objectives: Please answer the questions below and attach documentation if you believe you should receive points for State Objectives as described in the 2003 NOFA.

**Worst Case Housing Needs:** Will this proposal facilitate the construction, acquisition, or rehabilitation of permanent housing projects that meet all of the following requirements?

1. must be rental housing.
2. must target at least 25 percent of the program beneficiaries to be LTIG households who do not receive Federal housing assistance, and
3. must reduce these beneficiaries' rent and utility costs to below 50 percent of their gross incomes, or benefit persons who live in severely substandard housing.

Note: For the purposes of this State Objective, permanent means that residents' tenure in the housing will not be limited to a certain time period.

☐ Yes      ☐ No

**Farmworker Housing:** Does this activity facilitate the construction of permanent housing for farmworkers or the provision of health services in combination with permanent or seasonal housing for farmworkers?

☐ Yes      ☐ No

- c. Site Control. Do you have site control in place for at least 6 months beyond the anticipated CDBG award date? **Note: *Site acquisition costs incurred prior to the award of a grant, execution of a grant agreement, and clearance of any special conditions are NOT reimbursable from the grant.*** Examples of site control include an option to purchase or a purchase agreement, an option to lease or a leasehold interest, or a deed of trust. Include documentation that rights of way or easements have been obtained.

☐ Yes. Attach documentation.      ☐ No. Explain below.

**Note:** Site control is not an application requirement. If funded, site control is required within 12 months of contract execution.

- d. Environmental clearance. Describe the anticipated level of environmental clearance under the National Environmental Policy Act (NEPA).

**Housing Acquisition  
2003 CDBG Application**

<b>Data Type</b>	<b>Instructions:</b>	<b>Percentage</b>	<b>Data Source</b>
<b>3. <u>Overpayment</u></b>	Enter the percentage of all <u>renter</u> households who are paying more than 25% of income for housing. <i>Please show calculations on your attached Census table.</i>	____%	1990 Census Data <u>Summary Tape File 3A, Table H50</u>
<b>4. <u>Overcrowding</u></b>	Enter the percentage of total households who are overcrowded. <i>Please show calculations on your attached Census table.</i>	____%	1990 Census Data <u>Summary Tape File 1A, Table H21</u>
<b>5. <u>Need for Acquisition of Units</u></b>	Below, answer each applicable section.	<b>Percentage</b>	<b>Below, specify if data is from 1990 Census or local survey.</b>
a. <b><u>Rental Vacancy Rate</u></b>	For Rental Acquisition Projects: Enter the percent(s) of rental until that are vacant in the entire jurisdiction. Use either the appropriate vacancy rate from the 1990 Census <u>Summary Tape File 1A, General Profiles</u> , or from a local survey. <i>Attach the Census tables and/or the results of the local survey, if applicable.</i>	____%	<input type="checkbox"/> 1990 Census <input type="checkbox"/> Local Survey
b. <b><u>Homeownership Rate</u></b>	For Homeownership Acquisition Programs: Enter the percentage of all occupied housing units in the jurisdiction that are owner-occupied.  Use 1990 Census Summary Tape File 3A, General Profiles, "Housing Characteristics" which contains "Occupied Housing Units" and "Specified Owner-Occupied Housing Units."  <i>Attach the Census tables and show calculations.</i>	____%	<input type="checkbox"/> 1990 Census
<p><b>Note:</b> The Council of Governments' (COGs) needs figures for new low- and very low-income units will be analyzed as a percentage of current number of units in the community. The data for this factor have been independently obtained by the Department. If you would like a list of eligible jurisdictions and their COG needs factors, please contact CDBG at the telephone number on the cover of this application.</p>			

6. Supplemental information. Please describe and attach third party documentation, if available. Also, describe how this information directly affects your community's worsened overpayment and overcrowding needs and/or homeownership rate. In addition, indicate the page numbers where the documentation can be found in the application

- ☐ Worsened Overpayment: Information rebutting or not captured in the Census.
- ☐ Housing Overcrowding: Information rebutting or not captured in the Census.
- ☐ Homeownership Rate: Information rebutting or not captured in the Census

**B. TARGETED INCOME GROUP BENEFIT**

1. What percent of households benefiting from this proposed activity are TIG households?  
\_\_\_\_\_%
2. If this is a senior project, is the TIG benefit 51% or higher? Yes\_\_\_\_\_No\_\_\_\_\_.
3. Is this a multi-family, non-senior, rental project? Yes\_\_\_\_\_No\_\_\_\_\_.
4. If the answer to question number 3 was yes, and the project is not 100% TIG, is the percentage of CDBG dollars, relative to total activity costs, equal or less than the percentage of TIG households in the project> Yes\_\_\_\_\_No\_\_\_\_\_.

**C. 1. Sources and Uses Form.** Show all funds you plan to use: the CDBG funds applied for and all other funding sources that will be used on the entire project.

**SOURCES**

Uses	State CDBG	Local Financial	Private Financial	Program Income	Federal	Other State	Other (List)	Total
Land Acquisition								
Building Acquisition								
Construction On-site								
Construction Off-site								
Equipment								
Final Plans & Specs								
Fees								
Contingency								
General Administration								
Activity Delivery								
Relocation								
Planning								
Other:								
Other:								
Totals								

**D. PROGRAM READINESS CHART - (Housing Acquisition)**

<b>PROGRAM OPERATOR</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
In-House Procurement			
Sub-recipient Agreement*			
Subrecipient Letter of Interest			
Procurement*			

**\*Contract should be conditioned upon receipt of award**

<b>ENVIRONMENTAL</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Categorical Exclusion			
Partially Completed Environmental			

<b>SPECIAL CONDITIONS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Program Guidelines			
Anti-Displacement			
PI Re-Use Plan			

<b>READINESS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Public Hearings (all phases)			
Marketing Program			
Homebuyer Waiting List			
Housing Condition Survey			
Bank Loan Commitment			
Accounting & Recordkeeping			
Title & Escrow			

**E. REQUIRED MAPS.**

Please read the instructions below and return the requested information with your application.  
**If you are proposing multiple activities, please provide separate maps for each activity.**

- ✓ **Ethnic/TIG concentration maps.** Based on the applicant's knowledge of the area and available data, provide a legible map of the jurisdiction that shows:
  - the location of concentrations of non-white persons and Hispanic persons within the entire city or county, and
  - the location of concentrations of targeted income group families within the jurisdiction.
  
- ✓ **Location map.** The location map must be legible and must include:
  - the numbers and boundaries of census tract(s) or census block group(s) within which CDBG funds will be spent, and
  - the general location of the proposed activities, including geographic boundaries of the target or service areas covered by each activity.
  
- ✓ **Project site map.** For site specific activities, include a project site map which shows:
  - location and size of existing and proposed infrastructure (road, water, sewer, etc.), if applicable or pertinent.

**A. NEED FOR THE ACTIVITY**

Depending on local indicators and census data, jurisdictions may be able to strengthen their application by proposing the activity in a target area that has high poverty indicators. If you check target area, you will be held to performing in that area. If you check target area, please read the following two paragraphs:

Scoring for need. If you are proposing housing rehabilitation in a target area, you may use survey data showing the percentage of units in need of rehabilitation or dilapidated in place of the community-wide data stated in the jurisdiction's housing element. **The survey must be completed using the survey form contained in Chapter 16 of the 2002 CDBG Grant Management Manual. The survey data must be more recent than the data in the housing element and jurisdiction wide data must be amended into the housing element.**

Census data. You may also use Census data showing the age of housing stock and overcrowding for target area applications. **You must attach the proper census table for each block group identified as the target area.**

3. For applicants with a jurisdiction-wide housing rehabilitation program, or a target area program where current survey data are not available, complete this section and attach 2 copies of your Housing Element page showing this information.

Dilapidated units. The percent entered must be from the latest adopted Housing Element submitted to the HCD's Housing Policy Development Division. If the applicant does not have a Housing Element, contact a CDBG field representative for guidance.

Units suitable for rehabilitation. The percentages entered must be from the latest adopted Housing Element submitted to the HCD's Housing Policy Development Division. **If data are available, break the percentage amounts down by the categories "minor," "moderate," or "major" rehabilitation.** If the applicant does not have a Housing Element, contact a CDBG field representative for guidance.

4. For grantees proposing a target area rehabilitation program and are using the survey form contained in the 2002 CDBG Grant Management Manual, complete this section. Surveys will only be accepted for target areas, jurisdiction-wide data must be amended into the current housing element.



5. Age of housing stock. You must use 1990 Census data for this number. Age of housing stock data are available in the 1990 Census Summary Tape File 3A, Table H25 (see sample in Appendix G). If you are unable to find this Table, please ask your CDBG Representative for a copy.
6. Overcrowding. Overcrowding means 1.01 or more persons per room. You must use 1990 Census data for this number. Overcrowding data are available in the 1990 Census Summary Tape File 1A, Table H21 (see sample in Appendix G). If you are unable to obtain this Table, please ask your CDBG Representative for a copy.
7. Supplemental information. If the Census data for Age of Housing Stock and Overcrowding do not accurately depict your community's need in those categories, please attach third-party documentation, if available, showing your community's worsened needs in either of these two categories and tell us the page numbers. Such supplemental information shall not be older than five years from this year's application filing date and must be specific to the community.

Note: Data for condition of housing stock **cannot** be supplemented since the source data are either a housing element or recent survey as noted above.

## **B. TARGETED INCOME GROUP BENEFIT**

Projects that are not 100 percent TIG will not receive full points in this scoring category.

If the applicant does not provide information, the Department will assign points based on the percentage of households in the jurisdiction that are TIG.

Income restriction: Applicants should demonstrate there is an explicit limitation, based on income, for who is eligible to benefit from the project. (Note: Charging a fee to non-TIG project beneficiaries does not exclude them from being considered CDBG beneficiaries.)

Income survey: Applicants should conduct a survey of existing and/or potential beneficiaries. Please refer to Appendix B for guidance on survey methodology.

Other: Explain any other source that was used.

**C. PROGRAM READINESS**

Of the 150 points available for capacity, your application may be awarded up to 50 points if you complete and document actions that make the proposed project ready to proceed. These actions must be directly related to the activity. They may include the completion of the special condition and environmental review requirements, securing site control, securing financing for the entire project, or anything that would enable the applicant to be ready to proceed.

A partial list of Examples of such actions and the documentation to be submitted for each are in the Program Readiness Chart. (this is not a complete list of possible actions.)

**D. REQUIRED MAPS.**

Include all required maps at the end of each activity section for which you are applying.

**A. NEED FOR ACTIVITY**

1. What will the CDBG dollars be used for?

☐ Jurisdiction-wide program

☐ Target area program

**Note:** When using Target Areas for Rehabilitation Activities, rehabilitation work must be completed in all Target Areas.

---

2. Briefly describe the project.

- 
- a. State Objective:** Please answer the question below and attach documentation if you believe you should receive points for State Objectives as described in the 2003 NOFA.

**Worst Case Housing Needs:** Will this proposal facilitate the construction, acquisition, or rehabilitation of permanent housing projects that meet all of the following requirements?

1. must be rental housing.
2. must target at least 25 percent of the program beneficiaries to be LTIG households who do not receive Federal housing assistance, and
3. must reduce these beneficiaries' rent and utility costs to below 50 percent of their gross incomes, or benefit persons who live in severely substandard housing.

**Note:** For the purposes of this State Objective, permanent means that residents' tenure in the housing will not be limited to a certain time period.

☐ Yes

☐ No

---

---

3. **Jurisdiction-wide** rehabilitation programs.

**Dilapidated Units:** Enter the percent of housing units, ***jurisdiction-wide***, that are dilapidated and ***not*** suitable for rehabilitation.

	%
--	---

*Attach 2 copies of the page from your Housing Element where this percentage is documented.*

**Suitable for Rehabilitation:** Enter the percent of housing units, jurisdiction-wide that are suitable for rehabilitation.

<b>Minor</b>	<b>Moderate</b>	<b>Major</b>
%	%	%

*Attach 2 copies of the page from your Housing Element where this percentage is documented.*

---

4. **Target Area** rehabilitation programs *with* current survey data.

**Dilapidated units.** Enter the percent of housing units within the target area that are dilapidated and unsuitable for rehabilitation.

	%
--	---

*Attach a copy of the survey form used and a summary of the survey.*

**Suitable for Rehabilitation.** Enter the percent of housing units within the target area that are suitable for rehabilitation.

<b>Minor</b>	<b>Moderate</b>	<b>Major</b>
%	%	%

*Attach a copy of the survey form used and a summary of the survey.*

5. **Age of housing stock.** Enter the percentage of housing stock over 40 years of age (pre-1960) as shown in the 1990 Census Summary Tape File 3A, Table H25:

	%
--	---

*Attach the Census Table to the Application and show your calculations on the table.*

6. **Overcrowding.** Enter the percentage of households who are overcrowded as shown in the 1990 Census Summary Tape File 1A, Table H21:

	%
--	---

*Attach the Census Table to the Application and show your calculations on the table.*

7. **Supplemental Information.** Please describe, and **attach third-party documentation** that is less than five years old. Documentation must address worsened age of housing or housing overcrowding, and be specific to the community. Please list the page number in the application where the documentation is provided.

- ☐ Worsened Age: Information rebutting or not captured in the Census.
- ☐ Worsened Overcrowding: Information rebutting or not captured in the Census.
- ☐ Housing Element/Housing Condition Survey: Recent information that rebuts previous Housing Elements or Surveys.

**B. TARGETED INCOME GROUP BENEFIT**

1. Enter the percentage of households benefiting from this proposed activity who are TIG households: \_\_\_\_\_%
- 

2. How was this percentage determined? *Please attach documentation for the TIG benefit.*

- Income restriction? ☐ Yes ☐ No
  - Income survey? ☐ Yes ☐ No
  - Other? Explain:
- 

3. You are not required to have done a survey to establish benefit under Housing Rehabilitation, but if you did answer “yes” above to having done a survey, please answer the following:

- Survey date \_\_\_\_\_
  - Total # of anticipated beneficiaries \_\_\_\_\_
  - Number of households or persons surveyed \_\_\_\_\_
  - Number of responses \_\_\_\_\_
  - Number of TIG respondents \_\_\_\_\_
  - Number of Non-TIG respondents \_\_\_\_\_
-

**C. PROGRAM READINESS CHART - (Housing Rehabilitation)**

<b>PROGRAM OPERATOR</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
In-House Procurement			
Sub-recipient Agreement*			
Procurement*			

**\*Contract should be conditioned upon receipt of award**

<b>ENVIRONMENTAL</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
MRER			
8-Step			
Ready to Publish			
Environmental Finding Form			
Form 58.6			

<b>SPECIAL CONDITIONS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Program Guidelines			
Anti-Displacement			
PI Re-Use Plan			

<b>READINESS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Waiting List – Eligible Participants			
Eligible Contractors-Bidders			
Marketing Plan			
Loan Pool			
Eligible Properties			
Title & Escrow			
Other:			

**D. REQUIRED MAPS.**

Please read the instructions below and return the requested information with your application.  
**If you are proposing multiple activities, please provide separate maps for each activity.**

- ✓ **Ethnic/TIG concentration maps.** Based on the applicant's knowledge of the area and available data, provide a legible map of the jurisdiction that shows:
  - the location of concentrations of non-white persons and Hispanic persons within the entire city or county, and
  - the location of concentrations of targeted income group families within the jurisdiction.
  
- ✓ **Location map.** The location map must be legible and must include:
  - the numbers and boundaries of census tract(s) or census block group(s) within which CDBG funds will be spent, and
  - the general location of the proposed activities, including geographic boundaries of the target or service areas covered by each activity.
  
- ✓ **Project site map.** For site specific activities, include a project site map which shows:
  - location and size of existing and proposed infrastructure (road, water, sewer, etc.), if applicable or pertinent.



**A. NEED FOR THE ACTIVITY.**

2. Description. Project description and environmental clearance information.

- a. Provide a brief narrative about the project. Give information about the use of CDBG funds, what the total project will cost, the total number of beneficiaries, and a breakdown of TIG and LTIG beneficiaries. As relevant, provide information on the number of staff, what service they will be providing, their time base (full/part-time) and pay rate, including benefits, and the duration of time involved for the entire activity.

If you are proposing a combination activity, explain all aspects of these activities. If the project involves activities that will involve various user groups, describe the uses of the building/facility and include estimates for percentages of time projected for use by each user group.

**Example 1**--County of ABC will use \$45,000 in CDBG funds to purchase a van and pay fuel costs and the salary of a driver who will transport children of the Jonesville Migrant Housing Center to free health, vision, and hearing screening at the clinic in Smithsville. A clinic nurse, who will visit the center twice a week, will schedule appointments. The approximate cost of the van is \$30,000 and the salary of the driver is \$8 per hour. (10 hours per week, 24 weeks in a season, multiplied by two seasons). Fuel is expected to cost approximately \$1,000 for the two growing seasons.

**Example 2**--The City of XYZ will use \$175,000 of the grant request to provide the salary and benefits to one full-time caseworker (40 hours per week) and one part-time caseworker (20 hours per week). These staff will provide counseling and outreach to battered spouses for the 30 months of the standard agreement. Full time caseworker salary is \$45,000 per year plus benefits.

b. Environmental Clearance.

Describe the actual (if known) or estimated level of National Environmental Policy Act (NEPA) environmental clearance. Scheduling and budgeting should allow for sufficient time and funds to complete environmental clearances prior to commencement of activities. Community Facilities activities may require a more elaborate level of NEPA environmental clearance than other types of community development.

If you already have a NEPA environmental review record (ERR) for your proposed project that were prepared by another agency, these documents may or may not satisfy NEPA requirements for HUD purposes. Please contact your CDBG representative for further guidance on avoiding ERR duplication.

3. Be as specific as possible; quantify wherever possible to document the scope, magnitude, duration, and impacts of the problem.
4. **Attach copies of relevant documentation.** Highlight relevant passages. The most effective methods of documentation include:
  - a. surveys of intended beneficiaries regarding their needs and the impacts of not having the facility or service
  - b. surveys or records of existing service levels and needs showing the number of people served and turned away due to inadequate facilities or funds (unmet demand).
  - c. letters from law enforcement, mental health, health and social services agencies describing the direct health and safety impact on primarily TIG people that results from the lack of services or facilities

5. Documentation. Enter the type of documentation that is being provided to demonstrate the severity of the problem. Applications submitted for Public Services addressing serious problems should include strong documentation in the form of a needs analysis, user/beneficiary survey, and letters from local agencies. The most competitive applications will address a serious threat to the health, safety or well-being of the proposed beneficiaries.

Commitment to Provide Services. Indicate the service(s) committed to by funding or provider source, and attach documentation.

Contact Name and Phone Number. Enter the name and phone number of a contact person for each source used.

## **B. TARGETED INCOME GROUP BENEFIT**

If the applicant does not provide information, the Department will assign points based on the percentage of families in the jurisdiction that are TIG. **Activities with 90% TIG benefit will result in full points in the Benefit category.**

Income restriction: applicants should demonstrate there is an explicit limitation, based on income, for who is eligible to benefit from the project. (Note: Charging a fee to non-TIG project beneficiaries does not exclude them from being considered CDBG beneficiaries.)

Limited Clientele: For the purposes of assigning a benefit score, absent evidence to the contrary, 100% TIG benefit will be presumed for activities that exclusively serve a group of persons in any one or a combination of the following categories: abused children, battered spouses, adults meeting the Bureau of the Census' Current Population Report's definition of "severely disabled," homeless persons, illiterate adults, persons living with AIDs, and migrant farmworkers.

Income survey: for Public Services activities in which services will be provided to specific client groups not listed in the limited clientele paragraph above (for example, senior citizens, farmworkers, single mothers) applicants should conduct a survey of existing and/or potential beneficiaries. Please refer to Appendix B for guidance on survey methodology.

NOTE: for Public Services activities in which services or activities are open to all residents of the area, an income survey of the actual users of the facility may only be done if at least 51% of the residents of the area are TIG.

Other: Explain any other source that was used, e.g., waiting lists.

## **C. SOURCES AND USES**

### **1. Sources and Uses form.**

Sources. The major funding sources are printed on the form.

The amounts and sources for local and private funding contributions should match the information provided on the charts for "Other Funding Sources," pages 35-38. In addition, make entries here for any State, Federal, or other sources, that you will be using to finance the entire project.

For "other State" funds, if any are from another HCD program, please identify that program on this chart.

Uses. Identify the cost categories applicable to your proposed project and enter the amounts you plan to use. Allocate the amounts across the table to the funds you expect to receive from all the sources listed. This chart should include costs for the entire project (not just the CDBG portion). Your cost estimates can assist you in calculating these entries.

- For the Construction lines, include a factor for Davis-Bacon wages when applicable. All construction costs should include a contingency established in the line item.
- The Equipment category could include items such as outdoor playground equipment.
- Examples of fees that should be listed are commissions to brokers or closing costs for the acquisition of land or a building.
- General administration costs should include staff time for grant administration, such as clearing the grant agreement special conditions and grant reporting.
- Activity delivery costs should include the costs which the State CDBG Program would consider activity delivery.

*Please double-check the totals, in all rows and columns, for accuracy.*

## **D. PROGRAM READINESS**

Of the 150 points available for capacity, your application may be awarded up to 50 points if you complete and document actions that make the proposed project ready to proceed. These actions must be directly related to the activity. They may include the completion of the special condition and environmental review requirements, securing site control, securing financing for the entire project, or anything that would enable the applicant to be ready to proceed.

A partial list of Examples of such actions and the documentation to be submitted for each are in the Program Readiness Chart. (This is not a complete list of possible actions.)

## **E. REQUIRED MAPS.**

Include all required maps at the end of each activity section for which you are applying.

**A. NEED FOR ACTIVITY**

1. What will the CDBG dollars be used for? Check all that apply under each of the two categories. *Please see Appendix I of the NOFA for detailed description and limitations of these eligible uses.*

☐ Salary

☐ Other (describe) \_\_\_\_\_  
\_\_\_\_\_

- 
2. Project description and environmental clearance.

a. Briefly describe the service to be provided.

---

b. Environmental Clearance. Describe the anticipated level of environmental clearance under the National Environmental Policy Act (NEPA).

- 
3. What basic problem will this activity address?

- 
4. How was this problem determined?

Survey of intended beneficiaries?

☐ Yes ☐ No

Survey of existing service levels?

☐ Yes ☐ No

Letters describing the direct health and safety impact?

☐ Yes ☐ No

*Attach documentation of the problem (refer to Instructions for more information).*

5. Explain how and to what extent the proposed project will solve this problem. Are service providers committed?

***Attach documentation of the commitments to provide services. Documentation must be on service provider organization letterhead.***

6. Please describe below (attach additional sheets, if necessary) each service to be provided, continued or increased. If multiple services are proposed, answer the following questions **for each service**.

- Describe new service(s) to be provided.
- Describe the existing service(s) to be continued or increased.
- For new services, where is the nearest facility providing the proposed service now?
- Are there any special impediments for TIG households to access the service where it is provided now? Describe.
- For existing services, if increased services are proposed, describe (and document in Section 8) the unmet demand.

7. If this is an ADA accessibility issue, what alternatives did you consider and why is this alternative the best solution? For example, you are proposing to install an elevator in a city hall to provide access to the Housing Rehabilitation Program. Did you consider all of the possible options - for example, could you relocate the Housing Rehabilitation program downstairs?

8. **Documentation of problem and commitment to provide services.** In the column marked "Documentation," indicate the type of documentation (e.g., letter, resolution, newspaper clipping, report, etc.) and **attach a copy of the documentation**. In the column marked "Commitment to Provide Services" indicate the services(s) committed to by funding or provider source, and attach documentation. Enter the name and phone number of the contact person.

SOURCE	DOCUMENTATION	COMMITMENT TO PROVIDE SERVICES	CONTACT NAME & PHONE NO.
Dept. of Health Services			
County Health Dept.			
Fire Dept.			
Law Enforcement Agency			
Dept. of Social Services			
Newspaper			
Board of Supervisors			
Other:			
Other:			
Other:			



**B. TARGETED INCOME GROUP BENEFIT**

1. Enter the percentage of households benefiting from this proposed activity who are TIG households \_\_\_\_\_%

- 
2. How was the TIG percentage determined? *Please attach documentation for the TIG benefit*

- Income restriction? ☐ Yes ☐ No
- Income survey of existing beneficiaries? ☐ Yes ☐ No
- Income survey of potential beneficiaries? ☐ Yes ☐ No
- Limited clientele ☐ Yes ☐ No
- Other? Explain:

- 
3. You are not required to have done a survey to establish benefit under Public Services, but if you did answer “yes” above to having done a survey, please answer the following:

- Survey date \_\_\_\_\_
  - Total # of anticipated beneficiaries \_\_\_\_\_
  - Number of households or persons surveyed \_\_\_\_\_
  - Number of responses \_\_\_\_\_
  - Number of TIG respondents \_\_\_\_\_
  - Number of Non-TIG respondents \_\_\_\_\_
-

**D. PROGRAM READINESS CHART - (Public Services)**

<b>PROGRAM OPERATOR</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
In-House Procurement			
Sub-recipient Agreement*			
Procurement*			

**\*Contract should be conditioned upon receipt of award**

<b>ENVIRONMENTAL</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Environmental Assessment			
Categorically Excluded			
Environmental Finding Form			
Form 58.6			

<b>SPECIAL CONDITIONS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Site Control: Ownership			
Appraisal			
Purchase Agreement			
Bank Financing Commitments			
Program Income Reuse Plan			

<b>READINESS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Cost Estimate			
Architect & Engineer Contracted			
Preliminary Plans & Specifications			
Use Permit/Zoning			
Planning Study			
Engineer/Planning – Letter of Interest			
Draft Construction Contract			
Waiting Lists			

**D. REQUIRED MAPS.**

Please read the instructions below and return the requested information with your application.  
**If you are proposing multiple activities, please provide separate maps for each activity.**

- ✓ **Ethnic/TIG concentration maps.** Based on the applicant's knowledge of the area and available data, provide a legible map of the jurisdiction that shows:
  - the location of concentrations of non-white persons and Hispanic persons within the entire city or county, and
  - the location of concentrations of targeted income group families within the jurisdiction.
  
- ✓ **Location map.** The location map must be legible and must include:
  - the numbers and boundaries of census tract(s) or census block group(s) within which CDBG funds will be spent, and
  - the general location of the proposed activities, including geographic boundaries of the target or service areas covered by each activity.
  
- ✓ **Project site map.** For site specific activities, include a project site map which shows:
  - location and size of existing and proposed infrastructure (road, water, sewer, etc.), if applicable or pertinent.

**A. NEED FOR THE ACTIVITY.**

2. Description. Project description, site control, and environmental clearance information.

- a. Provide a brief narrative about the project. Give information about the use of CDBG funds, what the total project will cost, the total number of beneficiaries, and a breakdown of TIG and LTIG beneficiaries.

If you are proposing a combination activity, explain all aspects of these activities. If the project involves activities that will involve various user groups, describe the uses of the building/facility and include estimates for percentages of time projected for use by each user group.

**Example 1** --The City of XYZ will grant \$500,000 to the non-profit organization, the Battered Spousal Center of XYZ, to purchase and rehabilitate a building to house battered spouses and their children. These funds represent the total cost of the project. The City estimates the Center will provide services to 10 families/50 persons a week.

**Example 2** --The County of ABC will use \$500,000 of CDBG funds to construct, a health and social services center for the unincorporated community of XYZ. The land is being donated by a private individual. Sixty percent of the space will be used by the County Mental Health Department to provide services to migrant farm workers who are all Targeted Income Group. These services will be provided 30 hours a week. Thirty percent of the space will be used for job training for TANF recipients forty hours a week. The remaining ten percent of the space will be used to provide a drug and alcohol abuse counseling and diversion program to low income residents. These services will be provided twenty hours per week.

- c. Environmental Clearance.

Describe the actual (if known) or estimated level of National Environmental Policy Act (NEPA) environmental clearance. Scheduling and budgeting should allow for sufficient time and funds to complete environmental clearances prior to commencement of activities. Community Facilities activities may require a more elaborate level of NEPA environmental clearance than other types of community development.

If you already have a NEPA environmental review record (ERR) for your proposed project that were prepared by another agency, these documents may or may not satisfy NEPA requirements for HUD purposes. Please contact your CDBG representative for further guidance on avoiding ERR duplication.

3. Be as specific as possible; quantify wherever possible to document the scope, magnitude, duration, and impacts of the problem.
4. Attach copies of relevant documentation. Highlight relevant passages. The most effective methods of documentation include:
  - a. surveys of intended beneficiaries regarding their needs and the impacts of not having the facility or service
  - b. surveys or records of existing service levels and needs showing the number of people served and turned away due to inadequate facilities or funds (unmet demand).
  - c. letters from law enforcement, mental health, health and social services agencies describing the direct health and safety impact on primarily TIG people that results from the lack of services or facilities
8. Enter the name and phone number of a contact person for each source used. Applications submitted for Community Facilities addressing serious problems should include strong documentation in the form of a needs analysis, user/beneficiary survey, and letters from local agencies. The most competitive applications will address a serious threat to the health, safety or well-being of the proposed beneficiaries.

## **B. TARGETED INCOME GROUP BENEFIT**

If the applicant does not provide information, the Department will assign points based on the percentage of families in the jurisdiction that are TIG. **Activities with 90% TIG benefit will result in full points in the Benefit category**

Income restriction: applicants should demonstrate there is an explicit limitation, based on income, for who is eligible to benefit from the project. (Note: Charging a fee to non-TIG project beneficiaries does not exclude them from being considered CDBG beneficiaries.)

Limited Clientele: For the purposes of assigning a benefit score, absent evidence to the contrary, 100% TIG benefit will be presumed for activities that exclusively serve a group of persons in any one or a combination of the following categories: abused children, battered spouses, adults meeting the Bureau of the Census' Current Population Report's definition of "severely disabled," homeless persons, illiterate adults, persons living with AIDs, and migrant farmworkers.

Income survey: for community facilities in which services will be provided to specific client groups not listed in the limited clientele paragraph above (for example, senior citizens, farmworkers, single mothers) applicants should conduct a survey of existing and/or potential beneficiaries. Please refer to Appendix B for guidance on survey methodology.

NOTE: for community facilities in which services or activities are open to all residents of the area, an income survey of the actual users of the facility may only be done if at least 51% of the residents of the area are TIG.

Other: Explain any other source that was used, e.g., waiting lists.

## C. SOURCES AND USES

### 1. Sources and Uses Form.

Sources. The major funding sources are printed on the form.

The amounts and sources for local and private funding contributions should match the information provided on the charts for "Other Funding Sources," pages 35-38. In addition, make entries here for any State, Federal, or other sources, that you will be using to finance the entire project.

For "other State" funds, if any are from another HCD program, please identify that program on this chart.

Uses. Identify the cost categories applicable to your proposed project and enter the amounts you plan to use. Allocate the amounts across the table to the funds you expect to receive from all the sources listed. This chart should include costs for the entire project (not just the CDBG portion). Your cost estimates can assist you in calculating these entries.

- For the Construction lines, include a factor for Davis-Bacon wages when applicable. All construction costs should include a contingency established in the line item.
- The Equipment category could include items such as outdoor playground equipment.
- Examples of fees that should be listed are commissions to brokers or closing costs for the acquisition of land or a building.
- General administration costs should include staff time for grant administration, such as clearing the grant agreement special conditions and grant reporting.
- Activity delivery costs should include the costs which the State CDBG Program would consider activity delivery.

***Please double-check the totals, in all rows and columns, for accuracy.***

**D.     **READINESS****

Of the 150 points available for capacity, your application may be awarded up to 50 points if you complete and document actions that make the proposed project ready to proceed. These actions must be directly related to the activity. They may include the completion of the special condition and environmental review requirements, securing site control, securing financing for the entire project, or anything that would enable the applicant to be ready to proceed.

A partial list of Examples of such actions and the documentation to be submitted for each are in the Readiness Chart. (this is not a complete list of possible actions.)

**E.     **REQUIRED MAPS.****

Include all required maps at the end of each activity section for which you are applying.

**A. NEED FOR ACTIVITY**

1. What will the CDBG dollars be used for? Check all that apply. *Please see Appendix G of the NOFA for detailed description and limitations of these eligible uses.*

- ☐ Acquisition
- ☐ Construction
- ☐ Rehabilitation
- ☐ Other: (describe)

- 
2. Project description, site control, and environmental clearance.

- a. Briefly describe the project.

- 
- b. Site Control. If the proposed project involves site acquisition, please answer the following question. ***Note: Site acquisition costs incurred prior to the award of a grant, execution of a grant agreement, and satisfaction of any special conditions are not reimbursable from the grant.*** Examples of site control include an option to purchase or a purchase agreement, an option to lease or a leasehold interest, or a deed of trust. Include documentation that rights of way or easements have been obtained.

Do you have site control in place for at least 6 months beyond the anticipated CDBG award date?

- ☐ Yes. Attach documentation      ☐ No. Explain below.

- 
- c. Environmental Clearance. Describe the anticipated level of environmental clearance under the National Environmental Policy Act (NEPA).
-



3. What basic problem will this activity address?
- 

4. How was this problem determined?

Survey of intended beneficiaries?

☐ Yes ☐ No

Survey of existing service levels?

☐ Yes ☐ No

Letters describing the direct health and safety impact?

☐ Yes ☐ No

*Attach documentation of the problem (refer to Instructions for more information).*

---

5. Explain how and to what extent the proposed project will solve this problem. Are service providers committed?

*Attach documentation of the commitments to provide services. Documentation must be on service provider organization letterhead.*

---

6. Please describe below (attach additional sheets, if necessary) each service to be provided, continued or increased. If multiple services are proposed, answer the following questions **for each service**.

- Describe new service(s) to be provided.
- Describe the existing service(s) to be continued or increased.
- For new services, where is the nearest facility providing the proposed service now?
- Are there any special impediments for TIG households to access the service where it is provided now? Describe.
- For existing services, if increased services are proposed, describe (and document in Section 8) the unmet demand.

7. If this is an ADA accessibility issue, what alternatives did you consider and why is this alternative the best solution? For example, you are proposing to install an elevator in a city hall to provide access to the Housing Rehabilitation Program. Did you consider all of the possible options - for example, could you relocate the Housing Rehabilitation program downstairs?

8. Documentation of problem and commitment to provide services. In the column marked "Documentation," indicate the type of documentation (e.g., letter, resolution, newspaper clipping, report, etc.) and **attach a copy of the documentation**. In the column marked "Commitment to Provide Services" indicate the services(s) committed to by funding or provider source, and attach documentation. Enter the name and phone number of the contact person.

SOURCE	DOCUMENTATION	COMMITMENT TO PROVIDE SERVICES	CONTACT NAME & PHONE NO.
Dept. of Health Services			
County Health Dept.			
Fire Dept.			
Law Enforcement Agency			
Dept. of Social Services			
Newspaper			
Board of Supervisors			
Other:			
Other:			
Other:			

**B. TARGETED INCOME GROUP BENEFIT.**

1. Enter the percentage of households benefiting from this proposed activity who are TIG households: \_\_\_\_%

- 
2. How was the TIG percentage determined? *Please attach documentation for the TIG benefit*

- Income restriction? ☐ Yes ☐ No
- Income survey of existing beneficiaries? ☐ Yes ☐ No
- Income survey of potential beneficiaries? ☐ Yes ☐ No
- Limited clientele ☐ Yes ☐ No
- Other? Explain:

- 
3. You are not required to have done a survey to establish benefit under Community Facilities, but if you did answer “yes” above to having done a survey, please answer the following:

- Survey date \_\_\_\_\_
  - Total # of anticipated beneficiaries \_\_\_\_\_
  - Number of households or persons surveyed \_\_\_\_\_
  - Number of responses \_\_\_\_\_
  - Number of TIG respondents \_\_\_\_\_
  - Number of Non-TIG respondents \_\_\_\_\_
-

**C. 1. Sources and Uses Form.** Show all funds you plan to use: the CDBG funds applied for and all other funding sources that will be used on the entire project.

**SOURCES**

Uses	State CDBG	Local Financial	Private Financial	Program Income	Federal	Other State	Other (List)	Total
Land Acquisition								
Building Acquisition								
Construction On-site								
Construction Off-site								
Equipment								
Final Plans & Specs								
Fees								
Contingency								
General Administration								
Activity Delivery								
Relocation								
Planning								
Other: (List)								
<b>Totals</b>								

**D. PROGRAM READINESS CHART - (Community Facilities)**

<b>PROGRAM OPERATOR</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
In-House Procurement			
Sub-recipient Agreement*			
Procurement*			

**\*Contract should be conditioned upon receipt of award**

<b>ENVIRONMENTAL</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Environmental Assessment			
Categorically Excluded			
Environmental Finding Form			
Form 58.6			
Phase I – Conclusions & Recommendations			

<b>SPECIAL CONDITIONS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Site Control:			
Appraisal			
Purchase Agreement			
Bank Financing Commitments			
Program Income Reuse Plan			

<b>READINESS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Cost Estimate			
Architect & Engineer Contracted			
Preliminary Plans & Specifications			
Use Permit/Zoning			
Planning Study			
Engineer/Planning – Letter of Interest			
Draft Construction Contract			
Waiting Lists			

**E. REQUIRED MAPS.**

Please read the instructions below and return the requested information with your application.  
**If you are proposing multiple activities, please provide separate maps for each activity.**

- ✓ **Ethnic/TIG concentration maps.** Based on the applicant's knowledge of the area and available data, provide a legible map of the jurisdiction that shows:
  - the location of concentrations of non-white persons and Hispanic persons within the entire city or county, and
  - the location of concentrations of targeted income group families within the jurisdiction.
- ✓ **Location map.** The location map must be legible and must include:
  - the numbers and boundaries of census tract(s) or census block group(s) within which CDBG funds will be spent, and
  - the general location of the proposed activities, including geographic boundaries of the target or service areas covered by each activity.
- ✓ **Project site map.** For site specific activities, include a project site map which shows:
  - location and size of existing and proposed infrastructure (road, water, sewer, etc.), if applicable or pertinent.

**A. NEED FOR THE ACTIVITY.**

2. Description. Project description, site control, and environmental clearance information.

- a. Provide a brief narrative about the project. Give information about the use of CDBG funds, what the total project will cost, the total number of beneficiaries, and a breakdown of TIG and LTIG beneficiaries.

If you are proposing a combination of activities or uses, explain all aspects of these combinations. If the proposed activity is part of a larger project, please describe the whole project and how the CDBG-funded portion fits into that project. Remember that the completion of construction and use of the services by the TIG/LTIG beneficiaries must occur by CDBG contract expiration.

Example: The City of XYZ is proposing to use \$500,000 in CDBG funds to finance 600 wastewater hook-ups for TIG households in conjunction with a \$1,000,000 RDA/RECDS Water and Sewer loan and a \$43,700 RDA/RECDS grant.

- c. Environmental Clearance

Describe the actual (if known) or estimated level of National Environmental Policy Act (NEPA) clearance. Scheduling and budgeting should allow for sufficient time and funds to complete environmental clearances prior to commencement of activities. Public Works activities may require a more elaborate level of environmental clearance than other types of community development activities.

If you already have a NEPA environmental review record (ERR) for your proposed project that were prepared by another agency (e.g., USD-RD), these documents may or may not satisfy environmental review requirements for HUD purposes. Please contact your CDBG representative for further guidance on avoiding ERR duplication.

4. The most effective methods of documentation include:

- a. Surveys of existing service levels and needs showing the number of people served and turned away due to inadequate facilities or funds
- b. Letters from law enforcement, water agencies, and health agencies describing the direct health and safety impact on primarily TIG people that results from the lack of services or facilities



- c. Surveys of intended beneficiaries regarding their needs and the impacts of not having the facility or service
- 5. **Documentation of the problem is a critical element of a successful public works application.** The applicant should describe and discuss the problem being addressed by the proposed activity. It should also quantify the problem by including specifics on flows, supply deficiencies, and water quality problems. The most competitive applications will contain documentation from an **outside agency** stating that the problem the project is addressing is severe and health threatening. In particular, for water and sewer projects, documentation should be sought from the Department of Health Services and the State Water Resources Control Board.

## **B. TARGETED INCOME GROUP BENEFIT**

When addressing a neighborhood or community-wide public works problem, benefit is generally provided to all the occupants of a geographic area or all users of the facility/service. Typically, only a portion of the CDBG funds for such an activity benefits TIG households, unless the target area is extremely depressed. **For ranking purposes, TIG benefit of 90 percent or greater will receive full points under this category.**

Lowered benefit will not necessarily result in an application not being funded, but any activity with less than 90 percent benefit to TIG households is likely to be at a competitive disadvantage with other activities. Therefore, it is especially important when requesting funds for public works activities, to ensure that the application is as competitive as possible for all other activity rating criteria.

If an applicant does not feel that its proposed project will serve an area that would result in a relatively high benefit to TIG households, it may wish to structure its public works activity in such a manner that focuses benefit to TIG households. For example, when sewer/water laterals on private property are installed or repaired using CDBG funds, 100 percent benefit can be directed to TIG households by assisting only TIG households with CDBG funds.

If the applicant is working with a project that requires the formation of an assessment district, CDBG funds may be used to pay the assessments for TIG households. If an applicant wishes to use this approach, it is important to establish accurate, current data (through surveys usually) regarding the number and distribution of TIG households in the service area so as to be able to accurately estimate the amount of State CDBG funds that will be required to pay for the TIG assessments.

Appendix B includes a sample income survey form. Applicants are advised to evaluate the number of renter-occupied units when estimating both the extent and the likelihood of participation in the program if the application is successful.

## C. SOURCES AND USES

### 1. Sources and Uses Form.

Sources. The major funding sources are printed on the form.

The amounts and sources for local and private funding contributions should match the information provided on the charts for “Other Funding Sources,” pages 35-38. In addition, make entries here for any State, Federal, or other sources, that you will be using to finance the entire project.

For "other State" funds, if any are from another HCD program, please identify that program on this chart.

Uses. Identify the cost categories applicable to your proposed project and enter the amounts you plan to use. Allocate the amounts across the table to the funds you expect to receive from all the sources listed. This chart should include costs for the entire project (not just the CDBG portion). Your cost estimates can assist you in calculating these entries.

- For the Construction lines, include a factor for Davis-Bacon wages when applicable. All construction costs should include a contingency established in the line item.
- The Equipment category could include items such as outdoor playground equipment.
- Examples of fees that should be listed are commissions to brokers or closing costs for the acquisition of land or a building.
- General administration costs should include staff time for grant administration, such as clearing the grant agreement special conditions and grant reporting.
- Activity delivery costs should include the costs which the State CDBG Program would consider activity delivery.

***Please double-check the totals, in all rows and columns, for accuracy.***

**D. PROGRAM READINESS**

Of the 150 points available for capacity, your application may be awarded up to 50 points if you complete and document actions that make the proposed project ready to proceed. These actions must be directly related to the activity. They may include the completion of the special condition and environmental review requirements, securing site control, securing financing for the entire project, or anything that would enable the applicant to be ready to proceed.

A partial list of Examples of such actions and the documentation to be submitted for each are in the Program Readiness Chart. (This is not a complete list of possible actions.)

**E. REQUIRED MAPS.**

Include all required maps at the end of each activity section for which you are applying.

**A. NEED FOR ACTIVITY**

1. What will the CDBG dollars be used for?

- ☐ Water Distribution    ☐ Sewer    ☐ Flooding and Drainage    ☐ Other
- ☐ Assessments-- for which type of activity?

*(Check any of the above boxes for which CDBG funds will be used to pay the assessments.)*

---

2. Project description, site control, and environmental clearance.

a. Briefly describe the project and/or the service to be provided.

---

b. Site control. If the proposed project involves site acquisition, please answer the following question. ***Note: site acquisition costs incurred prior to the award of a grant, execution of a grant agreement, and satisfaction of any special conditions are not reimbursable from the grant.*** Examples of site control include an option to purchase or a purchase agreement, an option to lease or a leasehold interest, or a deed of trust. Include documentation that rights of way or easements have been obtained.

Do you have site control in place for at least 6 months beyond the anticipated CDGB award date?

- ☐ Yes. Attach documentation.    ☐ No. Explain below.

---

c. Environmental clearance. Describe the anticipated level of environmental clearance for the National Environmental Policy Act (NEPA.)

---

3. a. What severe health and safety needs does this activity address?

---

b. What is the likelihood that the funds requested will substantially reduce or eliminate the problem?

---

c. Discuss what steps, if any, the jurisdiction has taken or is planning to take to provide for long-term operation and maintenance of the system (e.g., a rate structure or financing plan to set up replacement or operating reserves, etc.)

---

4. How was the health and safety need determined? **Attach a copy of the documentation.**

Survey of existing service levels?

☐ Yes ☐ No

Survey of intended beneficiaries?

☐ Yes ☐ No

Letters describing the direct health and safety impact?

☐ Yes ☐ No

5. Documentation of problem. In the "Documentation" column, indicate the type of documentation (e.g., letter, resolution, newspaper clipping, report, etc.) and **attach a copy of the documentation**. Enter the name and telephone number of a contact person for each source used.

SOURCE	DOCUMENTATION	CONTACT NAME	CONTACT PHONE NO.
Dept. of Health Services			
Regional Water Quality Control Board			
Department of Water Resources			
County Health Department			
Fire Department			
Law Enforcement Agency			
Department of Social Services			
Newspaper			
Engineering Firms			
Local Water Board			
Irrigation District			
Board of Supervisors			
Other:			
Other:			

**B. TARGETED INCOME GROUP BENEFIT**

1. Enter the percentage of households benefiting from this proposed activity who are TIG households: \_\_\_\_\_%

- 
2. How was the TIG percentage determined? *Please attach documentation for the TIG benefit.*

- Income restriction? ☐ Yes ☐ No
- Income survey of existing beneficiaries? ☐ Yes ☐ No
- Income survey of potential beneficiaries? ☐ Yes ☐ No
- Other? Explain:

- 
3. You are not required to have done a survey to establish benefit under Public Works, but if you did answer “yes” above to having done a survey, please answer the following: (See Appendix B for guidance on conducting surveys.)

- Survey date \_\_\_\_\_
- Total # of anticipated beneficiaries \_\_\_\_\_
- Number of households or persons surveyed \_\_\_\_\_
- Number of responses \_\_\_\_\_
- Number of TIG respondents \_\_\_\_\_
- Number of Non-TIG respondents \_\_\_\_\_

**C. 1. Sources and Uses Form.** Show all funds you plan to use: the CDBG funds applied for and all other funding sources that will be used on the entire project.

**SOURCES**

Uses	State CDBG	Local Financial	Private Financial	Program Income	Federal	Other State	Other (List)	Total
Land Acquisition								
Building Acquisition								
Construction On-site								
Construction Off-site								
Equipment								
Final Plans & Specs								
Fees								
Contingency								
General Administration								
Activity Delivery								
Relocation								
Planning								
Other:								
Other:								
Totals								



**D. PROGRAM READINESS CHART - (Public Works)**

<b>PROGRAM OPERATOR</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
In-House Procurement			
Sub-recipient Agreement*			
Procurement*			

**\*Contract should be conditioned upon receipt of award**

<b>ENVIRONMENTAL</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Environmental Assessment			
8-Step			
Ready to Publish			
Environmental Finding Form			
Form 58.6			

<b>SPECIAL CONDITIONS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Site Control			
Financing			
Program Income Reuse Plan			
Anti-Displacement			

<b>READINESS</b>	<b>INDICATE “Yes” OR “No”</b>	<b>DOCUMENTATION Submitted</b>	<b>PAGE NO.</b>
Waiting List of Eligible Participants			
Eligible Contractors-Bidders			
Marketing Plan			
Preliminary Plans and Specs.			
Eligible Properties			
Engineered Procured			
Other:			

**E. REQUIRED MAPS.**

Please read the instructions below and return the requested information with your application.  
**If you are proposing multiple activities, please provide separate maps for each activity.**

- ✓ **Ethnic/TIG concentration maps.** Based on the applicant's knowledge of the area and available data, provide a legible map of the jurisdiction that shows:
  - the location of concentrations of non-white persons and Hispanic persons within the entire city or county, and
  - the location of concentrations of targeted income group families within the jurisdiction.
- ✓ **Location map.** The location map must be legible and must include:
  - the numbers and boundaries of census tract(s) or census block group(s) within which CDBG funds will be spent, and
  - the general location of the proposed activities, including geographic boundaries of the target or service areas covered by each activity.
- ✓ **Project site map.** For site specific activities, include a project site map which shows:
  - location and size of existing and proposed infrastructure (road, water, sewer, etc.), if applicable or pertinent.

**Activity Description Form for Planning Activities**  
**2003 CDBG Application**

---

**Planning Activities (for Colonias Only).** Applicants must document and demonstrate that the proposed activity is CDBG eligible and principally benefits the targeted income group. If you choose to propose a Planning activity, it will not be competitively rated.

If Planning Activities are proposed in this application, which Colonia(s) will benefit?

\_\_\_\_\_

Describe the eligible Planning activity, the percent of benefit to the targeted income group, and how this percent was determined. Attach applicable documentation.

\_\_\_\_\_

1. Describe the Planning Activity.

\_\_\_\_\_

---

**TARGETED INCOME GROUP BENEFIT**

---

2. Enter the percentage of households benefiting from this proposed activity who are TIG households \_\_\_\_ %

3. How was the TIG percentage determined? *Please attach documentation for the TIG benefit.*

- Income restriction? ☐ Yes ☐ No
- Income survey of existing beneficiaries? ☐ Yes ☐ No
- Income survey of potential beneficiaries? ☐ Yes ☐ No
- Census data? ☐ Yes ☐ No
- Other? Explain:

4. You are not required to have done a survey to establish benefit under Public Works, but if you did answer “yes” above to having done a survey, please answer the following: (See Appendix B for guidance on conducting surveys.)

- Survey date \_\_\_\_\_
- Total # of households in the service area \_\_\_\_\_
- Number of survey responses received \_\_\_\_\_
- Number of TIG respondents \_\_\_\_\_

**Activity Description Form for 10 Percent Set-Aside  
2003 CDBG Application**

---

**10 Percent Set aside (Not Applicable for Colonias).** Applicants must document and demonstrate that the proposed activity is CDBG eligible and principally benefits the targeted income group. If you choose to propose a 10 percent set-aside activity, it will not be competitively rated.

Describe the eligible 10% Set-Aside activity, the percent of benefit to the targeted income group, and how this percent was determined. Attach applicable documentation.

---

1. Describe the project or service to be provided.

---

**TARGETED INCOME GROUP BENEFIT**

---

2. Enter the percentage of households benefiting from this proposed activity who are TIG households \_\_\_\_\_ %

- 
3. How was the TIG percentage determined? *Please attach documentation for the TIG benefit.*

- Income restriction? ☐ Yes ☐ No
- Income survey of existing beneficiaries? ☐ Yes ☐ No
- Income survey of potential beneficiaries? ☐ Yes ☐ No
- Census data? ☐ Yes ☐ No
- Other? Explain:

- 
4. You are not required to have done a survey to establish benefit under Public Works, but if you did answer “yes” above to having done a survey, please answer the following: (See Appendix B for guidance on conducting surveys.)

- Survey date \_\_\_\_\_
  - Total # of households in the service area \_\_\_\_\_
  - Number of survey responses received \_\_\_\_\_
  - Number of TIG respondents \_\_\_\_\_
-

## **APPENDICES**

- A     Housing Element Self-Certification Language
- B     Survey Techniques for Targeted Income Group Benefit AND 2002 Income Limits
- C     Statement of Assurances
- D     Sample Resolution of the Governing Body
- E     Cost Categories for General Administration, Activity Delivery, and Program  
Loan/Activity
- F     Census Data Centers
- G     Sample Census Tables

**Appendix A**  
**Housing Element Self-Certification Language**  
**2003 CDBG Application**

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All applicants are required to submit a self-certification of the status of their housing element to the Department by April 4, 2003. The certification must be signed and dated by an authorized representative of the jurisdiction. The date on the form cannot be more than one year old at the time the CDBG application is due.

The following language is provided as a sample:

"I, \_\_\_\_\_, the City Attorney/County Counsel, Chief Executive Officer, or official designated by the governing body for the city/county of \_\_\_\_\_, have reviewed the updated housing element of \_\_\_\_\_, and hereby certify that this housing element, which includes updated information and which conforms with all other requirements of Article 10.6 (commencing with Section 65580) of Chapter 3 of Division 1 of Title 7 of the Government Code, has been prepared and was submitted to the Department of Housing and Community Development on \_\_\_\_\_, 20\_\_\_. The updated housing element was adopted on \_\_\_\_\_, 20\_\_\_ and is in conformity with all requirements of Article 10.6 et seq."

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

This Appendix provides information for applicants who are conducting neighborhood surveys. The Appendix has three sections:

1. Conducting the Survey /Client Confidentiality
  2. Survey Questions
  3. Information about Random Sampling
- 

### **Part 1. Conducting the Survey /Client Confidentiality**

The survey process should include a way to identify specific households who responded to the questionnaire and ensure the respondents' confidentiality. Respondents may be particularly sensitive to the question of household income. If a respondent's address is requested on the questionnaire, many persons may not answer the income questions or may not complete the questionnaire at all. Consequently, in order to promote a high response rate, the questionnaire should not include identifying information, such as the person's name or address.

Several acceptable methods for preserving anonymity of the respondent include:

1. The surveyor may hand deliver the questionnaire to the respondent and conduct the survey orally. At that time, upon completing this interview, the surveyor would mark off the respondent's address from an address list. If the questionnaire is delivered to the household or mailed and is to be collected at a later date, the collector can mark off the respondent's address at the time of collection.
2. If the questionnaire is to be mailed to respondents and returned by mail, the identifying information (respondent's address) would be on the return envelope. Upon receipt of the completed questionnaire, the address can be checked off the address list and the envelope and questionnaire can be separated. If the applicant uses this method, a statement ensuring respondent confidentiality should be included. Sample language is given below:

Replies to this questionnaire are confidential. Confidentiality is protected by not including names on any of the forms. We need a high response to have a chance of getting funded. Addresses are on the return envelopes so we can make follow-up contacts if no questionnaire is received and we need more questionnaires returned. When we get your envelope and questionnaire in the mail, we will check off that a questionnaire has been received from your house, remove the questionnaire from the envelope, and throw the envelope away. No identifying information will be kept with the questionnaires and the questionnaires will be tallied as a group.

3. If coded questionnaires are used, a simple method of coding is to place a number on the questionnaires or return envelopes. Each number is assigned an address from the address list. When the material is received, a list of returned numbers is kept. If the response rate is not high enough so that follow-up contacts are needed, the addresses of numbers for which no response has been received can be looked up and additional questionnaires sent out.

The income survey data should be less than 60 months old from the date the 2002 NOFA is released by the Department.

---

## **Part 2. Survey Questions**

These questions and the Directions for Random Sampling which follow in Part 3. are provided to assist the applicant in using a method of surveying which allows for validation and, at the same time, preserves the confidentiality of the respondent. Applicants may include other questions designed to elicit information which they feel is important. Experience has shown that overly detailed surveys may adversely affect the response rate.

The questions are designed to provide data regarding family size, income, and housing tenure. Family size and income are of particular significance in determining if a household is in the targeted income group.

**NOTE TO APPLICANTS:** Information regarding question #2 below. Please read the following information regarding income data and use the income limit figures that apply to your County in your questionnaire.

The reason for collecting income data is for the applicant to make a determination of how many persons surveyed fall into the categories of LTIG, TIG, and above TIG. The numbers provided in the chart under question #2 are **SAMPLES ONLY**. Use Line A for the income limits for the Lowest Targeted Income Group; use Line B for the income limits for the Targeted Income Group.

At the end of this appendix are the 2001 Income Limits by County. These pages are arranged alphabetically by county and show the LTIG and TIG income limits by size of household. Applicants should consult these pages and use the income limits for their county in their questionnaire. This will enable applicants to group the respondents as LTIG, TIG, and over TIG. LTIG is 50 percent and below of the adjusted area median family income. TIG is 80 percent and below of the adjusted area median family income (by definition, TIG includes LTIG). Over TIG is 81 percent and above of the adjusted area median family income.



## QUESTIONS

1. How many persons live in your household?
2. Using the chart below, please do the following:
  - a. Circle the column that matches the size of your household.
  - b. On a separate sheet of paper, make a determination of your income (you do not need to state your income on this questionnaire). Use the total household income in the last 12 months or the income claimed in the most recent Federal income tax filing. Include gross wages before deductions, public assistance, unemployment benefits, social security, pensions, alimony, child support, net income from owning or operating a farm or business, or any other source of income received regularly.
  - c. Compare the income of your family to the figures on the chart in Lines A and B under the column you circled for the size of your household (#a. above).
  - d. Read the following questions and make a check mark in the spaces indicated:
    - 1) Line A: Was your household income above \_\_\_\_\_ or below \_\_\_\_\_ the number associated with your family size? If you checked "above," also answer #2). If you checked "below," stop here and go on to question #3.
    - 2) Line B: Was your household income above \_\_\_\_\_ or below \_\_\_\_\_ the number associated with your family size?

Household Size	1	2	3	4	5	6	7	8
A (LTIG)	\$12,850	\$14,700	\$16,500	\$18,350	\$19,800	\$21,300	\$22,750	\$24,200
B (TIG)	\$20,550	\$23,500	\$26,400	\$29,350	\$31,700	\$34,050	\$36,400	\$38,750

3. Are your living quarters: \_\_\_\_\_ Owned **OR** \_\_\_\_\_ Rented  
 Name & address of owner \_\_\_\_\_  
 \_\_\_\_\_

### **Part 3. Information about Random Sampling**

In comparing applications for TIG benefit and need, the Department will accept reliable data about the local beneficiary population.

The Department will accept sampling statistics that represent the population as a whole if the applicant uses a valid survey methodology. Conversely, the Department may, after reviewing the submitted data, determine that the methodology was statistically unsound. In such cases, the Department may assign a score of zero for TIG benefit, or may use other generally recognized data such as U.S. Census data.

Two key features to your survey design should be 1) random selection of survey respondents, and 2) a large enough sample size to assure you have captured a reliable representation of the population. The following discussion provides some guidance in these two key areas.

#### **Random Sampling**

The guiding rule for sampling households or beneficiaries from the larger population is the avoidance of “sampling bias.” That is, sampling should not systematically exclude certain types of respondents. For example, surveys conducted mid-week during the day may exclude working households and provide inaccurate statistics about the larger population. If the survey methodology contains a sampling bias, larger sampling sizes will not solve the problem. Certain portions of the population will continue to be systematically excluded from the sampling.

As a general rule, each individual within the population should have an equal chance of being surveyed. Beware of using data sources that contain only certain portions of your beneficiary population. For example, some utility billing lists may contain only property owners, while the beneficiaries will be both owners and renters. Within your application to the Department, describe the sampling methodology and how it achieves a randomly-selected sampling.

#### **Adequate Sampling Size**

The required sampling size is determined by the size of the universe or the service area. The following table should be used to determine how many households a surveyor needs to interview to develop a survey of acceptable accuracy. For example, if you had a small water district of 50 households that you wanted to survey, you would have to get responses from all 50 households. If the district had 500 households, you would have to get responses from 250. If the district had 5,000 households, you would have to get responses from 400.

## Required Sample Sizes for Universes of Various Sizes

<u>Number of Households in the Universe</u>	<u>Required (Minimum # of Responses)</u>
1-50	All
51 - 55	50
56 - 63	55
64 - 70	60
71 - 77	65
78 - 87	70
88 - 99	80
100 - 115	90
116 - 138	100
139 - 153	110
154 - 180	125
181 - 238	150
239 - 308	175
309 - 398	200
399 - 650	250
651 - 1,200	300
1,201 - 2,700	350
2,701 or more	400

There is an exception to this table when dealing with a universe of 50 or less. As a general rule, a sample of less than the universe is unacceptable for statistical purposes. However, if the survey is to establish CDBG eligibility, for example, to apply for a planning and technical assistance grant, the rule would not need to apply. The reason for this is that the CDBG eligibility threshold is that at least 51% of the beneficiaries would be TIG. In such a case, as soon as the jurisdiction has answers from a sufficient number of respondent households to indicate that the required TIG percentage of 51% is present, it could consider the information sufficient for area benefit documentation purposes.

Using the example of the water district with 50 households, if a jurisdiction wanted to demonstrate CDBG eligibility for a planning grant, as soon as the jurisdiction had 26 TIG respondents, it could stop the survey, as the area benefit has reached the threshold of at least 51% TIG ( $26/50 = 52\%$ ).

Jurisdictions should consider hiring a professional demographer to conduct surveys of large areas. Surveys should be as statistically reliable as the U.S. Census.

Please contact your CDBG Representative if you wish further information on survey methodology.

Following this page are the 2002 Income Limits. Title 25 of the California Code of Regulations, Section 6932, is the controlling source of the official income limits and this appendix is provided as a courtesy in the application process.

California Health and Safety Code Sections 50079.5 and 50105 provide that the low and very low income limits established by the U.S. Department of Housing and Urban Development (HUD) are the State limits for those income categories. In addition, Sections 50079.5 and 50105 direct the Department of Housing and Community Development (HCD) to publish the income limits.

HUD released new FY 2002 income limits on January 31, 2002. Accordingly, HCD filed with the Office of Administrative Law amendments to Section 6932 of Title 25 of the California Code of Regulations. The amendments contain the new HUD income limits and also include new median income group and moderate income group limits, prepared by HCD pursuant to Health and Safety Code Section 50093.





















**Appendix C**  
**Statement of Assurances**  
**2003 CDBG Application**

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The City/County of \_\_\_\_\_ hereby assures and certifies that:

1. It possesses legal authority to apply for the grant and to execute the proposed program.
2. Its governing body has duly adopted or passed as an official act or resolution, motion, or similar action authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the applicant's chief executive officer or other designee to act in connection with the application and to provide such additional information as may be required.
3. It has or will comply with all citizen participation requirements, which include, at a minimum, the following components:
  - a. Provides for and encourages citizen participation, with particular emphasis on participation by persons of low and moderate income who are residents of slum and blight areas and of areas in which CDBG funds are proposed to be used, and provides for participation of residents in low and moderate income neighborhoods as defined by the local jurisdiction;
  - b. Provides citizens with reasonable and timely access to local meetings, information, and records relating to the grantee's proposed use of funds, as required by CDBG regulations, and relating to the actual use of funds under this title;
  - c. Provides for technical assistance to groups representative of persons of low and moderate income that request such assistance in developing proposals with the level and type of assistance to be determined by the grantee;
  - d. Provides for public hearings to obtain citizen views and to respond to proposals and questions at all stages of the community development program. These include at least the development of needs, the review of proposed activities, and review of program performance, which hearings shall be held after adequate notice, at times and locations convenient to potential or actual beneficiaries, and with accommodation for the handicapped. This shall include one public meeting during the program design, annual performance report preparation, and formal amendments. A public hearing shall be conducted prior to application submittal;
  - e. Solicits and provides for a timely written answer to written complaints and grievances, within 15 working days where practicable; and
  - f. Identifies how the needs of non-English speaking residents will be met in the case of public hearings where a significant number of non-English speaking residents can reasonably be expected to participate.

4. Its CDBG Program has been developed so as to primarily benefit targeted income persons and households, and each activity in the program meets one of the three national objectives: benefit to low and moderate income persons, elimination of slums and blight, or meets an urgent community need certified by the grantee as such.
5. It consents to assume the responsibilities for environmental review and decision-making in order to ensure compliance with NEPA by following the procedures for "recipients" of block grant funds as set forth in 24 CFR, Part 58, entitled "Environmental Review Procedures for Title I Community Development Block Grant Programs." Also included in this requirement is compliance with Executive Order 11988 relating to the evaluation of flood hazards, and Section 102(a) of the Flood Disaster Protection Act of 1973 (Public Law 93-234) regarding purchase of flood insurance, and the National Historic Preservation Act of 1966 (16 USC 470) and implementing regulations (36 CFR 800.8).
6. It consents to assume the role of either "Lead Agency" as defined by Section 21067 of the California Public Resources Code, or if another agency is or will be designated "Lead Agency," it consents to assume the role of "Responsible Agency" as defined by Section 21069 of the California Public Resources Code, in order to ensure compliance with CEQA.
7. It has resolved any audit findings or performance problems for prior CDBG grants awarded by the State.
8. It certifies that there is no plan, ordinance, or other measure in effect which directly limits, by number, the building permits that may be issued for residential construction or the buildable lots which may be developed for residential purposes; or if such a plan, ordinance, or measure is in effect, it will either be rescinded before receiving funds, or it need not be rescinded because:
  - a. It imposes a moratorium on residential construction, to protect the health and safety, for a specified period of time which will end when the public health and safety is no longer jeopardized; or
  - b. It creates agricultural preserves under Chapter 7 (commencing with Section 51200) of Part 2 of Division 1 of Title 5 of the Government Code; or
  - c. It was adopted pursuant to a specific requirement of a State or multi-State board, agency, department, or commission; or
  - d. The applicant has a housing element which the Department of Housing and Community Development has found to be adequate, unless a final order has been issued by a court in which the court determined that it is not in compliance with Article 10.6 of Chapter 3 of Division 1 of Title 7 of the Government Code; or
  - e. The use of the funds applied for in this application is restricted for housing for the targeted income group.
9. It will comply with the regulations, policies, guidelines, and requirements of OMB Circular Numbers A-87, A-128, A-102 and A-121, where appropriate, and the State CDBG regulations.

10. It shall comply with the following regarding nondiscrimination:
  - a. Title VI of the Civil Rights Act of 1964 (Public Law 88-352).
  - b. Title VIII of the Civil Rights Act of 1968 (Public Law 90-284) as amended; and will administer all programs and activities related to housing and community development in a manner affirmatively furthering fair housing.
  - c. Section 109 of the Housing and Community Development Act of 1974, as amended.
  - d. Section 3 of the Housing and Urban Development Act of 1968, as amended.
  - e. Executive Order 11246, as amended by Executive Orders 11375 and 12086.
  - f. Executive Order 11063, as amended by Executive Order 12259.
  - g. Section 504 of the Rehabilitation Act of 1973 (Public Law 93-112), as amended, and implementing regulations.
  - h. The Age Discrimination Act of 1975 (Public Law 94-135).
  - i. The prospective contractor's signature affixed hereon and dated shall constitute a certification under the penalty of perjury under the laws of the State of California that the bidder has, unless exempted, complied with the nondiscrimination program requirements of Government Code Section 12990 and Title 2, California Code of Regulations, Section 8103.
11. It will comply with the Federal Relocation Act (42 U.S.C. 4601 et seq.) and will certify that it is following a residential anti-displacement and relocation plan.
12. It will comply with the following regarding labor standards:
  - a. Section 110 of the Housing and Community Development Act of 1974, as amended.
  - b. Section 1720 et seq. of the California Labor Code regarding public works labor standards.
  - c. Davis-Bacon Act as amended (46 U.S.C. 276a) regarding prevailing wage rates.
  - d. Contract Work Hours and Safety Standards Act (40 USC 327-333) regarding overtime compensation.
  - e. Anti-Kickback Act of 1934 (18 USC 874) prohibiting "kickbacks" of wages in federally assisted construction activities.
13. It will comply with the Architectural Barriers Act of 1968 (42 USC 4151) and implementing regulations (24 CFR Part 40-41).



14. It will enforce standards of conduct which govern the performance of its officers, employees, and agents engaged in the administration of contracts funded in whole or in part by the CDBG Program (Section 7120(d) of the State regulations).
15. It will comply with the Hatch Act (5 USC 1501 et seq.) regarding political activity of employees.
16. It will comply with the Lead-Based Paint Regulations (24 CFR Part 35) which prohibits the use of lead-based paint on projects funded by the program.
17. It will not employ, award contracts to, or otherwise engage the services of any contractor while that contractor is in a period of debarment, suspension, or placement in ineligibility status under the provisions of 24 CFR Part 24.
18. It will give HUD, the Comptroller General, the State Department of Housing and Community Development, or any of their authorized representatives access to and the right to examine all records, books, papers, or documents related to the grant.
19. It will not attempt to recover any capital costs of public improvements assisted in whole or in part with CDBG funds by assessing properties owned and occupied by targeted income persons unless:
  - a. CDBG funds are used to pay the proportion of such assessment that relates to non-CDBG funding or
  - b. for the purposes of assessing properties owned and occupied by targeted income persons who are not of the lowest targeted income group, it does not have sufficient CDBG funds to comply with the provisions of a. above.
20. It will adopt and enforce policies
  - a. prohibiting the use of excessive force by its law enforcement agencies against individuals engaged in non-violent civil rights demonstrations and
  - b. enforcing applicable State and local law against physically barring entrance to or exit from a facility or location which is the subject of such non-violent civil rights demonstration within its jurisdiction.

The certification is made under penalty of perjury under the laws of the State of California.

CERTIFYING OFFICIAL: \_\_\_\_\_  
(Chief Administrative Executive)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Appendix D  
**RESOLUTION OF THE GOVERNING BODY (SAMPLE)**  
2003 CDBG Application

NOTE: An application for the State CDBG Program is to include, *at a minimum*, the following information in a resolution. Applicants have the option of including any additional pertinent information.

RESOLUTION NO. \_\_\_\_\_

A RESOLUTION APPROVING AN APPLICATION AND CONTRACT EXECUTION FOR FUNDING FROM THE GENERAL/NATIVE AMERICAN ALLOCATION OF THE STATE COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM AND AUTHORIZING THE EXECUTION OF A GRANT AGREEMENT AND ANY AMENDMENTS THERETO WITH THE STATE OF CALIFORNIA FOR THE PURPOSES OF THIS GRANT.

BE IT RESOLVED by the City Council of the City of \_\_\_\_\_ as follows:

**SECTION 1:** The City Council has reviewed and hereby approves an application for up to: *(list activities, location and dollar amount)*

*Example: Main Street Water Line: \$162,500*

*Southgate Neighborhood Housing Rehabilitation: \$254,000*

*10% set-aside for City-wide homeless services: \$46,000*

*General Administration: \$37,500*

**SECTION 2:** If the grant application is approved, the City will provide local leverage for the water line/rehabilitation program as follows: *(list local leverage and dollar amount)*.

*Example: Staff time (General Administration): \$5,000*

*Staff time (Housing Rehabilitation): \$5,000*

*Permit fee waivers: \$3,500*

*Redevelopment Agency funds: \$100,000*

*Public Works improvements in the rehabilitation area: \$50,000*

**SECTION 3:** The City Manager is hereby authorized and directed to act on the City's behalf in all matters pertaining to this application.

**SECTION 4:** If the application is approved, the City Manager is authorized to enter into and sign the grant agreement and any amendments thereto with the State of California for the purposes of this grant.

*(continued)*

PASSED AND ADOPTED at a regular meeting of the City Council of the City of \_\_\_\_\_ held on \_\_\_\_\_ by the following vote:

AYES:

NOES:

ABSENT:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Mayor of the City of \_\_\_\_\_

ATTEST:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

City Clerk of the City of \_\_\_\_\_

**Appendix E**  
**Cost Categories for General Administration,**  
**Activity Delivery, and Program Loan Activity**

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<b>Costs</b>	<b>General Administration</b>	<b>Activity Delivery</b>	<b>Program Loan/Activity</b>
Advertisements	X	X	
Appropriate Fees	X	X	X
Attend Workshops (HCD)	X		
Bidders Conferences	X	X	X
Construction			X
Engineering Draw/Design	X	X	
Environmental Studies	X	X	
Fiscal Reporting	X		
General Coordination	X		
Indirect Costs	X	X	
Insurance Premiums	X	X	
Labor Standards	X	X	
Loan Processing*	X	X	
Meetings with Banks	X	X	
Meetings with Homeowners/Homebuyers	X	X	
Personnel Costs	X	X	
Predevelopment Costs	X		
Procurement	X	X	
Program Reporting to CDBG	X		
Project Inspections	X	X	
Relocation Costs	X	X	X
Work Write-ups	X	X	

As the chart indicates, certain costs could be allocated to either General Administration or Activity Delivery. As a general rule, the determination of which category to use can be made on the basis of when the activity is performed during the term of the grant. For example, at the start of a housing rehabilitation grant while contract special conditions are being worked on, jurisdiction staff costs may be charged to General Administration. Once staff begins working with eligible households to rehabilitate housing units, then staff costs can be charged to Activity Delivery.

\* Costs of processing loans funded by another source may be charged to the CDBG-funded program if the other loan program is to be part of the jurisdiction's CDBG activity and is identified in the "Other Funding Sources" section of this application..

State

Department of Finance  
Demographic Research and Census Data Center  
915 "L" Street  
Sacramento, California 95814  
(916) 323-4086

Regional Centers:

Association of Bay Area Governments (ABAG)  
P.O. Box 2050  
Oakland, California 94604  
(510) 464-7900

Southern California Association of  
Governments (SCAG)  
800 W. 7th Street, 12th Floor  
Los Angeles, California 90017  
(213) 236-1800

Sacramento Area Council of Governments  
(SACOG)  
P.O. Box 808  
Sacramento, California 95812-0808  
(916) 457-2264

U.C. Berkeley  
State Data Program  
Survey Research Center  
2538 Channing Way  
Berkeley, California 94720  
(510) 642-6571

San Diego Association of Governments  
(SANDAG)  
First Interstate Plaza, #800  
401 B Street  
San Diego, California 92101  
(619) 595-5300

Counties Covered:

Alameda, Contra  
Costa, Marin, Napa,  
San Francisco, San  
Mateo, Santa Clara,  
Solano, Sonoma

Imperial, Los Angeles,  
Orange, Riverside, San  
Bernardino, Ventura

Sacramento, Sutter,  
Yolo, Yuba, the City of  
Roseville, and 21 other  
Northern California  
counties not listed for  
any other Regional  
Center

Universities and State  
Colleges

San Diego

## SAMPLE CENSUS TABLES

The following sample Census Tables are included in this Appendix. Each sample Table includes CDBG-added notations. These notes describe the calculations you must show on the tables you submit with your application.

These tables can be obtained through the 1990 Census Summary Tape Files 1A and 3A which are on CD-ROM. Census data should be available through local planning Departments, colleges, the State Census Data Center or, as a last resort, HCD. See Appendix F for a listing of State and regional Census Data Centers. Additional information on accessing the proper tables is included in either the instructions or the application form for each activity (the colored-paper sections of the application).

Counties are reminded that County-wide Census Tables contain the data for the cities within a county. All city data must be mathematically removed in order to accurately depict the unincorporated portion of a county. If you need help determining the necessity of this operation for any of your county's Census need indicators, please contact your CDBG Representative.

SAMPLE TABLE NAME	ACTIVITIES FOR WHICH THE TABLE IS REQUIRED
Renter Overpayment- <i>Summary Tape File 3A, Table H50</i>	Housing Acquisition Housing New Construction
Overcrowding- <i>Summary Tape File 1A, Table H21</i>	Housing Acquisition Housing New Construction Rehabilitation
Percent of Housing Stock Over 40 Years of Age- <i>Summary Tape File 3A, Table H25</i>	Rehabilitation
Homeowner and Rental Vacancy Rates- <i>Summary Tape File 1A, General Profiles</i>	Housing Acquisition (Rental Projects Only) Housing New Construction
Homeownership Rate- <i>Summary Tape File 3A, General Profiles</i>	Housing Acquisition (Homebuyer Assistance only)

## RENTER OVERPAYMENT

1990 Census Of Population And Housing Summary Tape File 3 A

040 California

050 Alpine County

### HOUSEHOLD INCOME IN 1989 BY GROSS RENT AS A PERCENTAGE OF HOUSEHOLD INCOME IN 1989

Universe: Specified renter-occupied housing units

		(Add the number of housing units above, and below, the underline)
Less than \$10,000:		
Less than 20 percent .....	4	
20 to 24 percent .....	<u>0</u>	4 (paying less than 25%)
25 to 29 percent .....	0	
30 to 34 percent .....	0	
35 percent or more .....	28	28 (paying 25% or more)
Not computed.....	2	
\$10,000 to \$19,999		
Less than 20 percent .....	10	
20 to 24 percent .....	<u>1</u>	11 (paying less than 25%)
25 to 29 percent .....	1	
30 to 34 percent .....	10	
35 percent or more .....	5	16 (paying 25% or more)
Not computed.....	10	
\$20,000 to \$34,999:		
Less than 20 percent .....	21	
20 to 24 percent .....	<u>10</u>	31 (paying less than 25%)
25 to 29 percent .....	5	
30 to 34 percent .....	0	
35 percent or more .....	4	9 (paying 25% or more)
Not computed.....	9	
\$35,000 to \$49,999:		
Less than 20 percent .....	38	
20 to 24 percent .....	<u>0</u>	38 (paying less than 25%)
25 to 29 percent .....	0	
30 to 34 percent .....	0	
35 percent or more .....	0	0 (paying 25% or more)
Not computed.....	0	
\$50,000 or more:		
Less than 20 percent .....	23	
20 to 24 percent .....	<u>0</u>	23 (paying less than 25%)
25 to 29 percent .....	0	
30 to 34 percent .....	0	
35 percent or more .....	0	0 (paying 25% or more)
Not computed.....	3	



---

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Add up those paying less than 25%	Add up those paying 25% or more	Add the sums together	Divide the number of households paying 25% or more by the total number of households.
4	28	107	<b>53 / 160 = 33%</b> is the percent of renter households paying 25% or more of income for gross rent
11	16	<u>53</u>	
31	9	160	
38	0		
<u>23</u>	<u>0</u>		
107	53		

---

## OVERCROWDING

1990 Census Of Population And Housing Summary Tape File 1A

040 California

050 Alpine County

### PERSONS PER ROOM

Universe: Occupied housing units

0.50 or less.....	273
0.51 to 1.00.....	<u>155</u>
1.01 to 1.50.....	16
1.51 to 2.00.....	6
2.01 or more.....	0

---

Housing units with one or fewer persons per room	Housing units with more than one person per room	Total number of housing units (Add the sums together)
273	428	16
<u>+155</u>	<u>+22</u>	<u>+6</u>
428	450	22

Divide the number of housing units with more than one person per room by the total number of housing units.

**22 / 450 = 4%** This is the percent of units overcrowded.

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**PERCENT OF HOUSING STOCK OVER 40 YEARS OF AGE (1960)**

1990 Census Of Population And Housing Summary Tape File 3 A

040 California  
050 Alpine County

**YEAR STRUCTURE BUILT**

Universe: Housing units

1989 to March 1990.....	132
1985 to 1988.....	98
1980 to 1984.....	153
1970 to 1979.....	569
1960 to 1969.....	<u>208</u>
1950 to 1959.....	34
1940 to 1949.....	36
1939 or earlier.....	89

---

Add up the units newer than 40 years	Add up the units older than 40 years	Total housing units (Add the sums together)	Divide housing units older than 40 years by total housing units
132	34	1,166	<b>159 / 1,325 = 12%</b> is the percent of the housing stock over 40 years of age (1960)
98	36	+ <u>159</u>	
153	<u>89</u>	1,325	
569	159		
+ <u>208</u>			
1,166			

# HOMEOWNER AND RENTAL VACANCY RATES (Go to page 2 of this table)

1990 Census of Population and Housing  
040 California  
050 Alpine County

Page 1

Total population.....	1,113
SEX	
Male.....	590
Female.....	523
AGE	
Under 5 years.....	79
5 to 17 years.....	203
18 to 20 years.....	36
21 to 24 years.....	65
25 to 44 years.....	414
45 to 54 years.....	128
55 to 59 years.....	55
60 to 64 years.....	49
65 to 74 years.....	48
75 to 84 years.....	31
85 years and over.....	5
Median age.....	33.3
Under 18 years.....	282
Percent of total population.....	25.3
65 years and over.....	84
Percent of total population.....	7.5
HOUSEHOLDS BY TYPE	
Total households.....	450
Family households (families).....	266
Married-couple families.....	195
Percent of total households.....	43.3
Other family, male householder.....	25
Other family, female householder.....	46
Nonfamily households.....	184
Percent of total households.....	40.9
Householder living alone.....	134
Householder 65 years and over.....	25
Persons living in households.....	1,112
Persons per household.....	2.47
GROUP QUARTERS	
Persons living in group quarters.....	1
Institutionalized persons.....	0
Other persons in group quarters.....	1
RACE AND HISPANIC ORIGIN	
White.....	806
Black.....	6
Percent of total population.....	0.5
American Indian, Eskimo, or Aleut.....	281
Percent of total population.....	25.2
Asian or Pacific Islander.....	5
Percent of total population.....	0.4
Other race.....	15
Hispanic origin (of any race).....	74
Percent of total population.....	6.6

Total housing units.....	1,319
<b>OCCUPANCY AND TENURE</b>	
Occupied housing units.....	450
Owner occupied.....	258
Percent owner occupied.....	57.3
Renter occupied.....	192
Vacant housing units.....	869
For seasonal, recreational, or occasional use.....	592
<b>Homeowner vacancy rate (percent).....</b>	<b>1.5</b>
<b>Rental vacancy rate (percent).....</b>	<b>55.5</b>
Persons per owner-occupied unit.....	2.43
Persons per renter-occupied unit.....	2.53
Units with over 1 person per room.....	22
<b>UNITS IN STRUCTURE</b>	
1-unit, detached.....	746
1-unit, attached.....	132
2 to 4 units.....	67
5 to 9 units.....	18
10 or more units.....	68
Mobile home, trailer, other.....	288
<b>VALUE</b>	
Specified owner-occupied units.....	194
Less than \$50,000.....	10
\$50,000 to \$99,000.....	68
\$100,000 to \$149,000.....	68
\$150,000 to \$199,999.....	24
\$200,000 to \$299,999.....	13
\$300,000 or more.....	11
Median (dollars).....	113,200
<b>CONTRACT RENT</b>	
Specified renter-occupied units paying cash rent.....	161
Less than \$250.....	46
\$250 to \$499.....	83
\$500 to \$749.....	28
\$750 to \$999.....	2
\$1,000 or more.....	2
Median (dollars).....	349
<b>RACE AND HISPANIC ORIGIN OF HOUSEHOLDER</b>	
Occupied housing units.....	450
White.....	359
Black.....	1
Percent of occupied units.....	0.2
American Indian, Eskimo, or Aleut.....	82
Percent of occupied units.....	18.2
Asian or Pacific Islander.....	3
Percent of occupied units.....	0.7
Other race.....	5
Hispanic origin (of any race).....	19
Percent of occupied units.....	4.2

←←←  
←←←

## HOMEOWNERSHIP RATE

1990 Census of Population and Housing  
040 California  
050 Alpine County

Page 1

Total housing units.....	1,319	
YEAR STRUCTURE BUILT		
1989 to March 1990.....	132	
1985 to 1988.....	98	
1980 to 1984.....	153	
1970 to 1979.....	569	
1960 to 1969.....	208	
1950 to 1959.....	34	
1940 to 1949.....	36	
1939 or earlier.....	89	
BEDROOMS		
No bedroom.....	24	
1 bedroom.....	232	
2 bedrooms.....	350	
3 bedrooms.....	488	
4 bedrooms.....	207	
5 or more bedrooms.....	18	
SELECTED CHARACTERISTICS		
Lacking complete plumbing facilities.....	69	
Lacking complete kitchen facilities.....	39	
Condominium housing units.....	48	
SOURCE OF WATER		
Public system or private company.....	1,018	
Individual drilled well.....	164	
Individual dug well.....	10	
Some other source.....	127	
SEWAGE DISPOSAL		
Public sewer.....	773	
Septic tank or cesspool.....	451	
Other means.....	95	
Occupied housing units.....	<b>450</b>	<b>(Also see page 2 of this table)</b>
HOUSE HEATING FUEL		
Utility gas.....	6	
Bottled, tank, or LP gas.....	153	
Electricity.....	34	
Fuel oil, kerosene, etc.....	26	
Coal or coke.....	0	
Wood.....	217	
Solar energy.....	4	
Other fuel.....	5	
No fuel used.....	5	

YEAR HOUSEHOLDER MOVED INTO UNIT

1989 to March 1990.....	142
1985 to 1988.....	136
1980 to 1984.....	93
1970 to 1979.....	42
1960 to 1969.....	25
1959 or earlier.....	12

TELEPHONE

No telephone in unit.....	78
---------------------------	----

VEHICLES AVAILABLE

Occupied housing units.....	450
None.....	20
1.....	159
2.....	132
3 or more.....	139

MORTGAGE STATUS AND SELECTED MONTHLY OWNER COSTS

Specified owner-occupied housing units.....	<b>180</b>	<b>(180 / 450 = 40%)</b> Divide the specified owner occupied housing units by the occupied housing to get the rate.
With a mortgage.....	121	
Less than \$300.....	10	
units		
\$300 to \$499.....	11	
homeownership		
\$500 to \$699.....	24	
\$700 to \$999.....	43	
\$1,000 to \$1,499.....	23	
\$1,500 to \$1,999.....	7	
\$2,000 or more.....	3	
Median (dollars).....	857	
Not mortgaged.....	59	
Less than \$100.....	2	
\$100 to \$199.....	24	
\$200 to \$299.....	22	
\$300 to \$399.....	5	
\$400 or more.....	6	
Median (dollars).....	209	

SELECTED MONTHLY OWNER COSTS AS A PERCENTAGE OF HOUSEHOLD INCOME IN 1989

Specified owner-occupied housing units.....	180
Less than 20 percent.....	74
20 to 24 percent.....	18
25 to 29 percent.....	21
30 to 34 percent.....	8
35 percent or more.....	59
Not computed.....	0